

Via the
Examination Office (PZ 807)
Department of Computer and Information Science
to the
Central Examination Office (ZPA)
for the attention of Mr Denis Katterre (C 403)
- at the university -

Application received on:

**Application for admission to the master's colloquium on the master's thesis (oral master's examination) in Computer and Information Science
Two-year master's programme, as per the current master's examination regulations**

Name, first name: _____ Student ID number: _____

Post code, city: _____ Street: _____

Email: _____ Phone: _____

I hereby apply for admission to the colloquium on the master's thesis (oral master's examination) in accordance with §16 para. 2 of the University of Konstanz's study and examination regulations for the Master's Programme in Computer and Information Science from 23 March 2015 as amended. As per § 15 para. 2, I have enclosed **the following documents**:

- 1.) Documentation of passing all course-related performance assessments as per § 4 para. 1 of the examination regulations (see attachment 1 of the examination regulations)!
- 2.) Certificate of enrolment for the current semester

I have handed in my master's thesis to the Central Examination Office on

As per § 18 para. 1 of the University of Konstanz's study and examination regulations for the Master's Programme in Computer and Information Science in the version from 23 March 2015 as amended, the contents of the master's thesis and related questions associated with its **subject area** are the subject of the oral examination:

First examiner (please print)

First examiner's signature

Second examiner (please print)

Second examiner's signature

The following date has been agreed for the colloquium on the master's thesis (final oral examination):

Date	Time	Location
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I am aware that I am not legally entitled to having my suggestions for examiners taken into consideration. I declare that I have not lost my right to take examinations for the Master's Programme in Computer and Information Science. I declare that I am not taking part in any other examination procedure. I am aware of the provisions of the current version of the examination regulations.

Place, date

Applicant's signature

As per § 18 of the University of Konstanz's study and examination regulations for the Master's Programme in Computer and Information Science in the version from 23 March 2015, I hereby approve the above-mentioned subject area and agree to have the examiners suggested by the applicant appointed.

Konstanz, _____

The Chair of the Examination Board (StPA) Computer and Information Science

List of courses
Master's degree programme:
Computer and Information Science (Two-year option)
 (according to the current study and examination regulations)

Name: _____

Student ID: _____

1. Core area of studies	grade	ECTS-Credits
Advanced level courses offered by the Department of Computer and Information Science and equivalent courses (60-77 ECTS):		
2. Supplementary area of studies	grade	ECTS-Credits
Courses offered by all departments. A maximum of 6 ECTS credits from courses offered by the Competence Centre for Key Skills, the Language Institute or the International Office (0-17 ECTS):		
	1 st and 2 nd area overall: 77 ECTS	
3. Final part of studies	grade	ECTS-Credits
Master's project:		9
Seminar:		4

Optional: **area of specialisation**

Date _____

signature student _____

Department of
Computer and Information Science

signature
student advisor _____

Only relevant for students who began their studies before 01.04.2016

Name: _____

Student ID: _____

Calculation of the **overall grade** according to

the new study and examination regulations 2016

(grades from the supplementary area – i.e. courses offered by other departments, courses on the BA-level offered by the department of computer and information science, the Competence Centre for Key Skills and the Language Institute or the International Office **do not enter the overall grade**)

the old study and examination regulations 2015

(under appropriate transitional provisions: **grades from the supplementary area** – i.e. courses offered by other departments, courses on the BA-level offered by the department of computer and information science, the Competence Centre for Key Skills and the Language Institute or the International Office **enter the overall grade**)

Date _____

signature student _____

Please submit to:
University of Konstanz
Department of Computer and Information Science
Examination Office
PZ 807 – Box 188
78467 Konstanz



Contact address after your studies

The department would like to stay in contact with its alumni. Therefore, we kindly ask you to indicate your e-mail address, which will still be valid after your studies.

Please sign the following statement:

Hereby, I agree that the Department of Computer and Information Science contacts me after my studies.

Yes

No

Student ID: _____

The following e-mail address will be valid after my studies:

Date _____

Signature _____