



Application for Extension of Processing Time

of

Bachelor Thesis

Master Thesis

Surname, First name

Matrikel No.

I will not be able to adhere to the deadline _____ for submission of my thesis
entitled

with Professor/PD/Dr. _____ for the following reasons:

I am applying for an extension of processing time for _____ .
The resulting extended submission date will be: _____.

Date

Signature

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Statement of the thesis advisor

I am supporting the request.

I recommend to decline the request.

Date

Signature

Decision by the chair of the exams commission

The deadline will be extended.

The deadline will NOT be extended.

Date

Signature of the chair of the exams commission