Signature of Student



Date

Application to Extend Deadline für Master's Thesis

	Master of EducationMaster of ArtsMaster of Science	
Last Name, First Name (if applic	able: Name at Birth):	
Student ID Number:	Date of Request (to be filled in by Examinations Office I):	
	deadline for my Master's thesis for important reasons.	
Subject/Modul:	Current Deadline:	
Supervisor: Reason:		
☐ Medical Certificate ☐ Other	documents to substantiate my request:	
Münster.		