

Application to Extend Deadline für Master's Thesis

	☐ Master of Educat ☐ Master of Arts ☐ Master of Science		
Last Name, First Name (if app	olicable: Name at Birth):		
Student ID Number:	Date of Request (to be fille	ed in by Examinations Office I):	
	he deadline for my Master's thesi		
Subject/Modul:	Curre	ent Deadline:	
Supervisor:			
Reason:			
I have attached the followir	ng documents to substantiate my	request:	
☐ Medical Certificate ☐ Other			
Münster,			
Date		Signature of Student	