



Ruhr-University Bochum Examination procedure for Master of Science

To the Examination Board of the International Master's Program Molecular and Developmental Stem Cell Biology at the Medical Faculty of the Ruhr-University Bochum

Basic data sheet and statement

Personal Details

Family name:		First name:	
Birth name:		Gender:	
Matriculation No.:		Semester:	
Date of birth/ -place:		Nationality:	
Address:			
Telephone:		Email:	

I am studying the master's course molecular and developmental stem cell biology.

I hereby declare that

- I am aware of the examination regulations of Master of Science in Molecular and Developmental Stem Cell Biology, approved on 23. April 2013 and the amendments of the same, approved on 07. November 2019.
- in accordance with section 9 (1) of the examination regulations, I am not registered for a similar examination procedure at any other university
- in accordance with section 9 (1) of the examination regulations, I did irrevocably fail a similar examination at any other university
- all the information mentioned above are true to the best of my knowledge

Place, Date

Signature of the applicant