MASTER Molecular and Developmental Stem Cell Biology

Name:	Enrollment No. (Matrikel):
Previous Bachelor or Master Degree (subject):	
University, where the Bachelor Thesis was performed	
Stem Cell Practical Courses (2 week courses: lab course,	4 average weekly hours /semester; seminar, 0.75 hours /semester; 4 CP)
All data must be typed All documents must be submitte	ed digitally

Course No.	Supervisor of the Stem cell practical course	Title of the Stem cell practical course	Type of exam	Grade	Semester absolving practical course	Date	Signature of supervisor	Submission R, T or L confirmed from examination office
1			R T P					
2			R					
3			R					
4			R					

At least one of the following three examination types is required: Written report (R); Talk (T); Poster (P).

Lab Rotation (4-week laboratory course: 4 average weekly hours /semester; seminar, 1 average weekly hr /semester; 5 CP):								
Supervisor of the lab rotation	Title of the Advanced Practical	Type of exam	Grade	Semester absolving lab rotation	Date	supervisor	Submission R, T or L confirmed from examination office	
		R 🗆 T 🗆 P 🗆						

Name: Enrollment No. (Matrikel):

Additional courses

Course No.	Supervisor of the Stem cell practical course	Title of the Stem cell practical course	Type of exam	Grade	Semester absolving practical course	Date	Signature of the supervisor	Submission R, T or L confirmed from examination office
1			R					
2			R					

At least one of the following three examination types is required: Written report (R); Talk (T); Poster (P).