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**APPLICATION FORM: CHANGE OF M.A. THESIS TITLE**

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**PERSONAL DATA**

Name

First name

Address

Matriculation number

E-mail address

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**PREVIOUS TITLE OF THE M.A. THESIS**

If applicable: Subtitle

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**NEW TITLE OF THE M.A. THESIS**

If applicable: Subtitle

<hr/> <p>Date, signature (Student)</p>
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**Approval of the thesis supervisor:**

<hr/> <p>Date, signature (First supervisor)</p>
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