

# universität freiburg

Current or previous applications for acceptance as a doctoral candidate (please check the appropriate box)

I declare that I have not yet submitted a doctoral application to a German or foreign university and that I have not been accepted as a doctoral candidate at any other faculty or university.

I declare that I have already submitted a doctoral application.

Date of the first registration: \_\_\_\_\_

University: \_\_\_\_\_

Faculty: \_\_\_\_\_

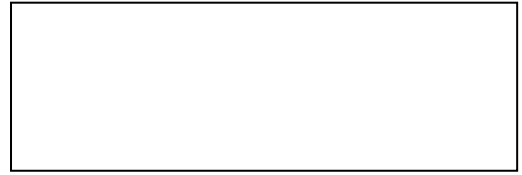
Topic of the dissertation: \_\_\_\_\_

\_\_\_\_\_  
Please state the reason why the procedure has not been completed, is still ongoing or attach a certified copy of the doctoral degree certificate.

\_\_\_\_\_  
With my signature I declare that the above information is correct.

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of the applicant



Absender/Stempel der Professur  
Sender /stamp of the chair

## Stellungnahme zur Wahl des angestrebten Titels

*Statement regarding the choice of the aspired title*

Hiermit stimme ich der von Frau/Herrn  
*Herewith I agree to Ms./Mr.*

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getroffenen Wahl des angestrebten Titels gem. § 1 Abs. 2 PromO zu (bitte gewählten Titel ankreuzen).

*choice regarding the aspired title according to § 1, section 2 PromO (please tick the aspired title).*

Dr. rer. nat. / *Dr. of natural sciences*

Dr. phil. / *Dr. of philosophy*

Ein Nachweis gem. § 6 Abs. 2 Nr. 7 PromO über ausreichende Kenntnisse der deutschen Sprache ist erforderlich (bitte ankreuzen).

*A language certificate of the German language according to § 6, section 2, No. 7 PromO is necessary (please tick).*

ja/yes

nein/no

Das Promotionsvorhaben wird in folgendem Promotionsfach durchgeführt (bitte ankreuzen):

*The dissertation project will be executed within the area of (please tick):*

058 Forstwissenschaft *Forest Sciences*

050 Geographie *Geography*

385 Geoökologie *Geoecology*

765 Geowissenschaften *Geosciences*

294 Materialwissenschaften *Materials Sciences*

064 Naturschutz *Nature Conservation*

458 Umweltschutz *Environmental Protection*

077 Wasserwirtschaft *Water Management*

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Ort, Datum

*Place, Date*

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Unterschrift der ErstbetreuerIn

*Signature of first supervisor*