

Master's Degree Project

Registration form, Department of Biology, Lund University

I have read degree project instructions

(Date and Student signature)

Student fulfills requirements

(Date and Study Advisor signature)

Name of student

Civic reg. number (Personnummer)

E-mail

Phone

Major in:

General or Specialization:

- Biology → General
 Animal Ecology
 Aquatic Ecology
 Conservation Biology
 Plant Biology
 Molecular Biology → General
 Medical Biology
 Microbiology
 Molecular Genetics and Biotechnology
 Bioinformatics

Credits:

- 30 credits (hp)
 45 credits (hp)
 60 credits (hp)

About the Project:

- Project plan completed, with Time plan
 My project is carried out abroad
 I need the Animal Welfare course

Important Project Dates:

Start: _____ (year, month, day)

Half time: _____ (year, month, day)

End: _____ (year, month, day)

Preliminary Project Title (or subject)

Department/Place of work:

Supervisor:

Name _____ Dept. _____

Email _____ Phone _____

Other Supervisor, e.g. Contact person at LU (compulsory for projects outside LU) or co-supervisor:

Name _____ Place of work _____

Email _____ Phone _____

Date

Student signature

Approved by Supervisor (or Contact person at LU):

(Date and Supervisor signature)

OK with short project description at Biology website? Yes No

Project plan approved by Coordinator (_____)::

(Date and Master's Program Coordinator signature)