Registration Research Project

Name, Firstname:__________________________    Matriculation number:___________
Semester: __
What are you studying? - Course of study, subject

MSc Bioinformatics □
MSc Medical Informatics □
Responsible:
Ms Georgatou
spyridoula.georgatou@uni-tuebingen.de
MSc Computer Science □
MSc Media Informatics □
Responsible:
Ms Hallmayer, Ground Floor, B118, Sand 13
renate.hallmayer@uni-tuebingen.de

MSc Machine Learning □
Responsible:
Ms Döring Keplerstr. 2, room 164
pruefungsamt.kognitionswissenschaft@uni-tuebingen.de

Title Research Project:
________________________________________________________
Supervisor:
________________________________________________________
Start of project (duration 2 months):
________________________________________________________

Please note that you can only register bindingly for one research project. With your signature you confirm that you have taken note of the guidelines of the Department of Computer Science on the dealing with plagiarism.

Tübingen, ..................... Signature (student)..................................................

Signature (supervisor).........................................................
1In the sense of the examination regulations: as this is an examination performance, it cannot be passed/failed. Whether there is then an opportunity to repeat it depends on the supervisor.

2Since it is an examination performance, only university lecturers may sign it, lecturers and academic staff who have been delegated examination authority may act as supervisors. 2 supervisors may also be named.

3The term does not have to be within a semester, but the examination performance is then recorded for the semester for which the project was registered.