ATTENTION: This checklist is only a working aid.

Please use the version in German.

Checklist:

Office for Doctoral Researchers Office Hours: Tue + Thu 09:30 – 12:00 Tel. +49 511 762 17309 Fax +49 511 762 5819 E-Mail: promotionen@ maphy.uni-hannover.de

The following documents have to be submitted for the Application as Doctoral Researcher as per § 6 Doctoral Degree Regulations:

- Application as doctoral researcher, § 6 Sec. 1 Doctoral Degree Regulations
- > Attachments:
 - 1. A valid certificate of registration by the Registration Office
 - 2. A signed CV with a description of the personal and the professional career
 - 3. A complete list of scientific publications
 - 4. At least¹ three identical copies of a thesis in printed form. (Please take into account the requirements specified in § 6 Sec. 1 Doctoral Degree Regulations.)
 - 5. One identical, electronically readable copy of the thesis (CD with <u>additional</u> file of the German and English abstracts)
 - 6. Declaration regarding the doctoral procedure as per § 6 Sec. 1 S. 2 d) Doctoral Degree Regulations
 - 7. Proposal of the supervisor concerning referee appointment, constitution of the doctoral committee (§ 7), as well as place and time of the oral examination (§ 9) or the thesis defence (§ 10) as per § 6 Sec. 2 Doctoral Degree Regulations
 - 8. Specifications for the statistics of doctorates
 - 9. If necessary: application for composing the thesis in a different language, as per § 6 Sec. 1 S. 2 c) Doctoral Degree Regulations

As determined in the faculty board meeting of 2017-04-26, the decision about the application is made by the vice-dean, allowing for further regulations decided by the faculty board (the chair and further members of the doctoral committee must not be from the same institute, and one referee must not be the superior of another). When the vice-dean has taken the decision, the doctoral researcher will receive a respective written notice. After all reports have been received by the Office for Doctoral Researchers, the doctorate-granting lecturers of the faculty shall be given access to the thesis. If on the basis of the reports the thesis is accepted after having been displayed, the vice-dean shall fix the date of the examination or thesis defence. The time between the announcement of the date and the examination must be at least five working days.

¹ If more than two referees are proposed, it would be necessary to provide more than three printed copies of the thesis.

Academic degree held when filing the application: Priv. address: Email (both office and private): Tel. (office): Name of Institute: (Please complete legibly) Promotionsbüro der Fakultät für Mathematik und Physik Leibniz Universität Hannover Welfengarten 1, Raum C411 30167 Hannover Date Application as Doctoral Researcher Dear Vice-dean, I hereby request the registration of my thesis as Dr. rer. nat. according to § 6 Doctoral Degree Regulations and irrevocably declare as per § 2 Sec. 2 Doctoral Degree Regulations that besides my thesis, I choose, as further component the thesis defence as per § 10 Doctoral Degree Regulations the oral examination as per § 9 Doctoral Degree Regulations, with the following combination of subjects: Major subject: Minor subje	Name, First name:
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Signature	Yours sincerely,
JIGHALUIC	

Dissertation Statement

Name (in Printed Letters)

as per	§ 6 Sec. 1 Doctoral Degree Regulations
l hereb	y declare that I have authored my thesis with the title
•	nt to the guidelines specified in § 6 Sec. 1 S. 2 d) Doctoral Degree tions. According to these guidelines, I declare in detail:
1.	I know the rules of the current Doctoral Degree Regulations and have adhered to them, and I agree to an examination according to its terms.
2.	I have composed the thesis on my own (declaration of authorship), I have neither included paragraphs from other authors nor texts of my own examination papers, without marking them in the thesis. Furthermore I have marked in my thesis all aids and sources used.
3.	I have not provided, neither directly nor indirectly, nonmonetary services to third persons for agency work or as regards content elaboration for my thesis (i. e., I have not acquired or been imparted the scientific paper by third persons, neither in part or as a whole, for money or other compensation.)
4.	I have not submitted the thesis for another academic examination.
5.	☐ I have <u>not</u> submitted the same thesis, or a thesis similar in its essential parts, to another faculty or another university as a dissertation. ☐ I have submitted the same thesis, or a thesis similar in its essential parts, to another faculty or another university as a dissertation, with the following result:
	 fill in if applicable - □ I have not submitted another paper as a dissertation elsewhere. □ I have submitted another paper as a dissertation elsewhere, with the following result:
6.	I agree that my dissertation will be checked as to compliance with general scientific standards, especially including electronic data processing software.
 Date, P	Place and Signature

Proposal of the supervisor for appointment of referees and doctoral committee, as well as for the date of the examination or thesis defence

according to § 6 Sec. 2 S. 3 Doctoral Degree Regulations

I. Referees as per § 7 Secs. 3 to 5 Doctoral Degree Regulations
Referee:
(Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.)
Institute:
Adress:
E-Mail:
Research Subject:
Co-Referee:
(Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.)
Institute:
Adress:
E-Mail:
Research Subject:
Co-Referee:(Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.)
Institute:
Adress:
E-Mail:
Research Subject:
If needed, additional co-referees: (Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.)
Name:
Institute:
Adress:
E-Mail:
Research Subject:
Name:
Institute:
Adress:
E-Mail:

Research Subject:

II. Doctoral Committee according to § 7 Sec. 7 Doctoral Degree Regulations Chair of Doctoral Committee: _ (Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.) Institute: Adress: E-Mail: Research Subject: Member of Doctoral Committee: (Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.) Institute: Adress: E-Mail: Research Subject: Member of Doctoral Committee: _____ (Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.) Institute: Adress: E-Mail: Research Subject: If needed, additional members of Doctoral Committee: (Please fill in legibly, and specify complete title, e. g. Prof. Dr. rer. nat.) Name: Institute: Adress: E-Mail: Research Subject: Name:

Institute: Adress: E-Mail:

Research Subject:

III. Proposal of place and time for the defence or oral examination

Physics (Tel.-Ext. 17309):

As a date for the defence or oral examination, the following has been agreed with the Office for Doctoral Researchers at the Faculty of Mathematics and

, .
Date, time:
Name and number of building:
Exact address with postal code:
Exact designation of room:
This date takes into account the deadlines of the display of the thesis and its reports and of the defence or examination announcement, and has been coordinated with the Office for Doctoral Researchers, the proposed referees, and the members of the doctoral committee.
Place, date and signature of supervisor
Name of supervisor (in printed letters)

Specifications for the Statistics of Doctorates - Page 1 *First name, Name: Birth name (if different): _____ *Citizenship: German other: _____ Exact designation required *Employment Relationship with LUH: yes no *Cooperation with Research Institution: yes no *Cooperation with Business Sector: yes no *Participation in a national or international research training group? yes no If yes, which one? _____ Please indicate exact designation! Period from ______ to _____ * Participation in a national/international collaborative research centre? yes no If yes, which one? _____ Exact designation required Period from ______ to _____

Specifications for the Statistics of Doctorates - Page 2

*Kind of Diss	sertation	1			
		Monograph (complete oeuvre)			
		Cumulative (Publication thesis or collective thesis)			
*Semesters needed for the thesis:					
*of which semesters of enrolment as doctoral student:					
*Current matriculation number:					

Please complete as accurely as possible! If applicable, contact your supervisor if you are uncertain. Thank you.