

**Email** 



## **Supervision Agreement - Master Microbiology**

## between

## Institute for Chemistry and Biology of the Marine Environment (ICBM) Carl von Ossietzky University of Oldenburg

Carl-von-Óssietzky-Str. 9-11 26111 Oldenburg

represented by a member of the teaching staff of the Master Microbiology Program and \_ as external supervisor. 1. The student who prepares the project: Name Matriculation number 2. Type of module: **Profile Module (6 Credits)** [ ] [ ] Main Module (12 Credits) Research project (12 Credits) [ ] Master Thesis (30 Credits) [ ] 3. Course name or project title 4. The primary supervisor in Oldenburg: Name The external supervisor: Name University / Institution Address



Institut für Chemie und Biologie des Meeres (ICBM)

Start of the project (date)

Master program



## Supervision:

The external institution is responsible for providing the Master student with suitable equipped laboratory workspace, equipment and consumables. The external supervisor is responsible for the supervision of Master student's scientific work.

The evaluation of the project will be carried out together with the local supervisor, who is a member of the teaching staff of the Master Microbiology Program at the ICBM in Oldenburg.

To be finished until			
		ne Master Microbiology Program (or his/hate and the external supervisor have sign	
The external supervisor will hereby	be admitted as e	external auditor.	
	Date	Signature	
Primary supervisor			
External supervisor			
Master student			
Coordinator of the			