

To: Examination Office

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**Request for Extension of the Processing Time for the Thesis**

<b>Personal details</b>			
Last name, first name			
Student ID			
degree programme			
Street, house number			
Postal code, city			
Phone		Email	
<b>Details of thesis</b>			
1. Examiner			
Start date			
Previous submission deadline			
<b>Reason for request</b>			
Desired submission date			
Approval 1. Examiner			