Registration Form for the Ph.D. Colloquium, Faculty NT

Please submit the form, *fully completed*, to the Doctoral Office at promotionen-nt@uni-saarland.de

by no later than: (to be filled out by the doctoral office)

Title: please select Previous degree: previous degree

First Name, Last Name:

Ph.D. supervisor:

Date of the doctoral colloquium (to be arranged in advance with the Doctoral Office!)

Date:

Time:

Chair of the Doctoral Colloquium:

academic assessor:

Reviewer (Supervisor):

Reviewer:
(*Address (if external)*)

Reviewer:
(*Address (if external)*)

Building and Room Information:

Short link to join via MS Teams:

Title of the Dissertation:

Brief Summary (No more than 10 lines)

Additional information/comments: