

REGISTRATION FORM FOR A MASTER THESIS OUTSIDE OF UNIL

Student last name:

Student first name:

Master:

BEC

MLS

MB

HT

External Co-director

External Supervisor

UNIL Co-director

Title:

Last name:

First name:

Address:

Phone number:

E-mail address:

Master thesis title:

Place, Date:

Signature of the external Co-director:

Signature of the UNIL Co-director:

Signature of the student:

Return the form:

by post: Secrétariat de l'École de biologie
 Quartier UNIL-Sorge
 Bâtiment Amphipôle, bureau 312
 1015 Lausanne

by e-mail: biologie-etudiants@unil.ch

by coming to the Secrétariat during opening hours

with the **CV** of the external co-Director, the **project description form** and a **motivation letter**.

This procedure **does not exempt** you from making your 3 choices of Master projects in the UNIL online database, in case your external project is not accepted.