



Registration for the master exam in physics

Please fill in the form below and submit it to the study coordinator of the Physics Institute at least 4 weeks before the desired date of the master's examination.

I am registering for the master exam in Physics:

Specialization	<input type="checkbox"/> Physics of Condensed Matter (PHY448) <input type="checkbox"/> Particle Physics (PHY498) <input type="checkbox"/> Astrophysics and Cosmology (AST548) <input type="checkbox"/> Bio and Medical Physics (PHY598)
First name	_____
Last name	_____
Students ID number	_____
Supervisor	_____
Desired Date (every Thursday from 3pm)	_____
Signature	_____

Please also read the "Master thesis information sheet" which is available at:
<http://www.physik.uzh.ch/de/studium/studienberatung/formulare.html>