

Universität Münster | PA I | Münzstraße 10 | 48143 Münster

Dr. Maria Wernsmann  
Administrative director

To the Head of Faculty, or  
Chair of the Examinations Board of the Faculty FB  
01, 02, 06, 07, 08, 09 or 15

Bachelor Examinations Office  
Master Examinations Office

Münzstraße 10  
48143 Münster

Contact Sandra Bregulla  
Tel. +49 251 83-35038

pa.bregulla@uni-muenster.de

Date

**Request to Appoint Examiner for an Individual Examination  
(Antrag auf Einzelprüfungsberechtigung – English version)**

Last name, First name (birth name, if applicable): \_\_\_\_\_

Student ID number: \_\_\_\_\_

Email: \_\_\_\_\_

I request the following examiner

\_\_\_\_\_

(Last name, First name)

in case there is no follow-up contract with the University of Münster:

follow-up employment with: \_\_\_\_\_ from \_\_\_\_\_

Examiner's contact data, incl. email address (please provide complete information)

to supervise my dissertation  / administer an examination

as my first examiner  / second examiner

for the degree programme: \_\_\_\_\_/

subject: \_\_\_\_\_.

\_\_\_\_\_  
Date Last name, First name (first examiner) Signature of first examiner

\_\_\_\_\_  
Date Last name, First name (second examiner) Signature of second examiner

\_\_\_\_\_  
Date Signature of student

\_\_\_\_\_  
Date Last name, First name (Head of Faculty/ Chair of Examinations Board) Signature

Please note: This form must be completed and submitted to the responsible Head of Faculty or the responsible chair of the Examinations Board **no later than 14 days prior** to registering for the corresponding examination in order to ensure the orderly appointment of the examiner. The unit responsible for appointing the respective examiner should forward the signed document to the Examinations Office I. Following receipt of the complete and signed request form, the Examinations Office I will notify all participants via email.