



Eidgenössische Technische Hochschule Zürich  
Swiss Federal Institute of Technology Zurich

## Application BSc Thesis at another University

**Student number**

**Surname, name**

**Date**  
(8 weeks)

End

**Host university**  
(name of university, country)

**Supervisor at host university**  
(surname, name, address, e-mail)

**Title/Topic**

**Supervisor D-MATL**

Date

Signature

**Approval by the D-MATL Student Exchange Advisor**

**Dr. Sara Morgenthaler**

Date

Signature

Please send the completed form by e-mail to [studies@mat.ethz.ch](mailto:studies@mat.ethz.ch) or hand it in at the Study Administration office in HCP F 33.1