



LUND
UNIVERSITY
Department of Biology

Registration form Master's Degree Project

(Examensarbete för Masterexamen)

Name of student

Civic registration number

Address

E-mail

Phone

Major:

Biology
Molecular Biology

30 ECTS credits
45 ECTS credits
60 ECTS credits

Animal Ecology
Animal Physiology
Animal Systematics
Aquatic Ecology
Biology
Chemical Ecology
Cell- and Molecular Biology
Cellular and Molecular Immunology
Ecological Microbiology
Ecotoxicology
Genetics
Immunology
Integrative Zoology

Marine Biology
Microbiology
Molecular Ecology
Molecular Genetics
Nature Conservation - Land or Water
Management and Conservation Biology
Neurobiology
Pharmacology
Plant Biology
Plant Ecology and Systematics
Theoretical Ecology
Toxicology
Sensory Biology

- Research plan included
- Time plan included
- Have read PM
- Projects carried out abroad/
insurance

Starting date

Expected examination date

Project title

Department/place of work

Main supervisor (name, dept, phone, e-mail)

Other supervisors

Contact person within the Biology department (for external projects only)

Code -----

Student fullfills prerequisites

Date and Signature Study advisor

Lotta Persmark/Tina Ledje

Date and signature Programe coordinator

Klas Flärdh/Jan-Åke Nilsson

Date and signature of student

Date and signature of supervisor