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|    | **Fakultät****für****Biologie** | **Anlage 3** |

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 **Start-Up Report**

 **Thesis Committee and Doctoral Researcher Meeting**

 Please complete the form during the meeting, and return it, signed by all attendees, to:

 Dean’s Office, Faculty of Biology, Biocenter, Am Hubland, D-97074 Würzburg

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| **General information** |
| **Doctoral Researcher:**Family Name:       Middle Name/Initials:      First Name:       E-Mail:      Department:        |
| **Thesis key words:****Projected date of completion:**    /   /      |

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| **Meeting** |
| **Date of meeting:**  |
| **Supervisors attending the meeting:****Name and Department:**1.  in person [ ]  2.  in person [ ]  separate meeting [ ]  date: 3.  in person [ ]  separate meeting [ ]  date:   |

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| **Issues discussed, results and recommendations**If provided space is not sufficient, please put your comments on additional sheets of paper and supply those with this report form  |
| **Background, topics and objectives of the thesis**       |
| **Research Training Plan – Part A****Scientific work program for the 1st year**      |
| **Research Training Plan – Part B****Educational training programme for the 1st year** (lectures, seminars, practical courses, conferences, language courses, transferable skills, etc.)      |

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| **Next meeting** |
| **Projected date of first annual meeting (~ 1 year after start date):**   /   /      |

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| **Additional comments** |
|       |

**1st Supervisor Name**:

Signature: ………………………………………………………Date…………………

**2nd Supervisor Name**:

Signature: ………………………………………………………Date…………………

**3rd Supervisor Name**:

Signature: ………………………………………………………Date…………………

**Doctoral Researcher Name**:

Signature: ………………………………………………………Date…………………

**Dean’s Office use only**

Date of receipt: **………………….** Initials: **………………..**