



ATTACHMENT 1

Starte-Up Report Advisory Committee and Doctoral Student Meeting

Please complete the protocol and return it signed
by all attendees to the PhD-Office

General Information	Meeting Date:
First Name, Family Name Doctoral Student:	
(Preliminary) Title of Thesis:	
Projected Date of Completion:	
Venue (only if meeting took place outside the University of Würzburg)	
Advisors attending meeting on Date	
1.	<input type="checkbox"/> in person <input type="checkbox"/> via video conference <input type="checkbox"/> via phone
2.	<input type="checkbox"/> in person <input type="checkbox"/> via video conference <input type="checkbox"/> via phone
3.	<input type="checkbox"/> in person <input type="checkbox"/> via video conference <input type="checkbox"/> via phone

Issues discussed, Results and Recommendation
Topics and Objectives of the Thesis, Background

Research Training Plan – Teil A, Scientific Work Program for the First Year

Research Training Plan – Teil B; further educational Training Program for the First Year (lectures, seminars, practical courses, conferences, language courses, soft skills, etc.)

Projected Date of First Annual Meeting:

1st Advisor Name:

Signature:

Date:

2nd Advisor Name:

Signature:

Date:

3rd Advisor Name:

Signature :

Date:

Doctoral Student:

Signature :

Date: