

Workflow Internship/Lab Rotation/Research project¹

Surname: _____ First name: _____

Reg. number: _____

 Subject: Forschungsprakt. Org. Chemie 1 (CH3032)
 Forschungsprakt. Org. Chemie 2 (CH3033), nur bei erstem Studienschwerpunkt OC/BC
 Wahlfachbelegung

Group/Company: _____

Project adviser: _____

Date started: _____

Planned topic: _____

Planned weekly working hours: _____ hours => planned duration in weeks: _____ weeks.

Note: Total workload for CH3032 or CH3033: 10 ECTS x 30 h = 300 h, 250 h of which for the practical part.

- Signed up in TUM-Online
- Registered or approved Master student in Chemistry at TUM
OR
- Confirmation for more than 120 credit points in the Bachelor program is attached
- Group is part of the „Lehrbereich Organische Chemie und Biochemie“
OR
- Research project in was approved by the course instructor
- Liability insurance with adequate coverage was concluded
Note: - Insurance must cover *research* activities without permanent supervision!
- Equipment of the TUM must not be excluded!
- Last general safety instruction is no longer than 12 months back in time

 _____, _____
 (Date) (Signature student)

To be completed by the project adviser

- Confirmation of the above entered „date started“
- Safety instruction at the beginning of the project according to
 - §14 GefStoffV
 - §14 BioStoffV
 - other: _____
- The instruction was documented in written form
- The student has received a copy of the documentation
- The documentation will be kept for at least 24 months
OR
- A copy of the documentation is attached

 _____, _____
 (Date) (Signature project adviser)

¹ To be sent to Dr. S. Breitenlechner – LSt. OC 1, TUM – Lichtenbergstr. 4 – 85747 Garching, at the latest one week after the project start