



CAS Cognitive Science University of Heidelberg

Registration for Module II exam

Surname:

First name:

Matricule number:

Current degree program:

Component	Course
Complementary 1	<input type="text"/>
Complementary 2	<input type="text"/>
Methods	<input type="text"/>
Advanced	<input type="text"/>

Topic of my presentation*:

Date of the next exam:

I hereby register for the upcoming Module II exam and I am familiar with the modalities of the exam.**

**Slight modification of your topic is possible up to 1 week before the date of the exam. Please inform us on time!*

***Registration is only possible up to 4 weeks before the date of the exam.*