



Eidgenössische Technische Hochschule Zürich  
Swiss Federal Institute of Technology Zurich

Department of Physics

## Research Plan

### Doctoral thesis:

Doctoral thesis title (provisional)

Beginning date of doctoral thesis

### Doctoral student:

Student number

Name

E-mail

Institution (if external doctoral thesis)

Date, signature

### Supervisor:

Name, title

Date, signature

### Co-examiner (if already known):

Name, title

Affiliation

E-mail

**Please hand in this form together with the research plan and the form "Approval of the research plan" to the Doctoral Administration Office of D-PHYS**