



LUDWIG-
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MÜNCHEN

Fakultät für
Chemie und Pharmazie
LMU Mentoring



LMU Mentoring - Faculty of Chemistry and Pharmacy

Mentor-Mentee-Agreement

Profil

Name, Surname _____

Address _____

Phone _____

E-Mail _____

Department _____

Supervisor _____

Status

- Doctoral student
 Post-Doc
 Junior research group leader

Topic of the scientific work _____

Estimated completion date _____

Motivation

Please include an up to one page letter of motivation for joining the LMU Mentoring Program, as well as a CV and if possible a list of publications.

- Motivation for joining the Program
 CV
 List of publications

Name and contact data of Mentor _____

Approval

Date Signature Department

Date Signature of Mentor