

Workshop License

First name: _____

Last name: _____

Matriculation number: _____

| | | |
|---|---------------------|-------------------|
| Study Workshop Model 20.40 Room –152 Gäng | Date of instruction | Stamp , Signature |
| Study Workshop Wood 20.40 Room –149 Busch | Date of instruction | Stamp , Signature |
| Study Workshop Metal 20.40 Room –115 Hochman | Date of instruction | Stamp , Signature |
| Study Workshop Digital 11.20 Room S105–108 Jager | Date of instruction | Stamp , Signature |

The workshop license completed by the workshops must be handed in at the Office of the Dean of Studies (20.40 Room 139) or posted in the mailbox of the Office of the Dean of Studies of Architecture in the foyer on the ground floor of Building 20.40.

To be completed by the Office of the Dean of Studies:

Submitted on: _____

Stamp and signature: _____