**Statement of individual author contributions to figures/tables of manuscripts included in the dissertation**

**Important notes *(please delete these notes prior to including the form in the thesis)***

* Including this form in your thesis is mandatory.
* Please use one table per manuscript and delete lines, which are not applicable.
* Do not forget to cite the publication or manuscript in the legend of the figures or tables used/adapted.
* Remember that for a compilation/ chapter-based dissertation, your thesis must contain at least two manuscripts.
* If not yet published, please indicate the status of the manuscript at thesis submission (e.g. in revision/ accepted in [name of journal]/ in preparation/ unpublished)
* Your original signature on this form is required for the printed copies submitted at the GSLS.
* When including results from papers with shared first authorships, the statements of individual contributions to figures/tables must be signed by all first authors, as well as by the responsible supervisor(s)
* Remember that the final dissertation (PDF) uploaded to OPUS after your defense must NOT contain any signatures.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Manuscript 1** (complete reference): | | | | | | |
| **Figure # in thesis** | **Figure # in publication** | **Author Initials,** Responsibility decreasing from left to right | | | | |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Table # in thesis** | **Table # in publication** | **Author Initials,** Responsibility decreasing from left to right | | | | |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Explanations (if applicable):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Manuscript 2** (complete reference): | | | | | | |
| **Figure # in thesis** | **Figure # in publication** | **Author Initials,** Responsibility decreasing from left to right | | | | |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Table # in thesis** | **Table # in publication** | **Author Initials,** Responsibility decreasing from left to right | | | | |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Explanations (if applicable):

I also confirm my primary supervisor’s acceptance.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctoral Researcher’s Name Date Place Signature

If required:

Shared First Author Name Date Place Signature