



General Requests

Name: _____ Date of birth: _____ Matriculation n°: _____

Address : _____

Bachelor of Arts Master of Arts Teacher training *Jena Model*

1 st subject		Semesters studied in this field of study:
if applicable, 2 nd subject		Semesters studied in this field of study:

I herewith request

Withdrawal **Extension of deadline** **3rd attempt**

Special Applicaton: _____

from/for the following module examination(s)

Examination number	Module code	Examiner	Date of examination	Attempt

➔ **PLEASE NOTE!** Your request will not be processed unless a **detailed justification** (back or separate piece of paper) and necessary proof and/or supporting documentation (original or authenticated copy) are attached. If this request is made for medical reasons, please attach a medical certificate

Date

Student's signature

*** The following is NOT to be completed by the student!**

The request is: **approved** **rejected**
 withdrawals **requirement:** **justification:**
 RAT / RAN
 FVL HA / BA / MA **Deadline**.....

Date / Name