

English translation from the German, legally binding is only the German original. The translation is for information purposes only.



**FRIEDRICH-SCHILLER-
UNIVERSITÄT
JENA**

**Academic Office for Student Affairs and
Examinations (ASPA)**
Carl-Zeiß-Platz 1 · 07743 Jena

General requests

Student: _____ Date of birth: _____ Matriculation number: _____

Address, postal code, city: _____

Bachelor of Arts Master of Arts teacher training (*Jena model*)

1. study programme		Number of semesters in this field of study:
If applicable: 2. study programme		Number of semesters in this field of study:

I hereby request:

withdrawal from an examination extension of the submission deadline third attempt
 request for specific requirements or compensation of disadvantages: _____

from/for the following module examination(s):

Examination number	Short form of the module name	Examiner	Date of examination:	Attempt

→ **ATTENTION** Your request will not be processed if:

- a) you do not give a detailed **justification** (overleaf or a separate sheet of paper) and
- b) enclose **supporting documents**, i.e. original or certified copy.

If this request is made for medical reasons, please enclose a medical certificate ("ärztliches Attest").

Date

Signature of the student

*To be filled in by the office/person in charge.

Additional requirements:

Requests on hardship/exceptional circumstances:

Reasons:

Deadline:

date and abbreviation

The request shall be: approved not approved