



Application for the verification of the eligibility for recognition of an additional module

Matriculation-Nr.:

Name:

First Name:

Faculty at which the examination is to be taken:

Examination Number (to be inquired at the LSF or at the respective faculty):

Course Title (Deutsch/Englisch):

Lecture

Seminar

Scientific Project

Quantity of CP:

Name of the examiner:

Note: For successful recognition of the application, a meaningful module description of the additional module must also be enclosed.

To be filled in only by the Examination Office:

Recognition possible: Yes

No

Date/Signature Head of Examination Office: _____ / _____