



APPLICATION FOR ACCREDITATION OF PROVEN KNOWLEDGE

Study Program

First Name

Surname

Student Matriculation No

Semester

to be filled out by student

I hereby, apply for accreditation for the following courses:

Title of course, weekly contact hours per semester, semester, lecturer

in the case of multiple courses, please use additional sheet

Proven knowledge:

Name of course, extent of course (hours), date of examination, institution, place of course

Please attach a copy of certificates, confirmations and table of content (PDF attachment or hardcopy)

.....

Date
Signature of student

to be filled out by head of study program

The accreditation has been

- approved
- disapproved
- partly approved , student has to participate in course examination

due to

- proven knowledge
- lack of conformity of proven knowledge concerning content and extent

.....

Date
Signature of Head of Study Program

Please note that all course contents including possible approved courses are relevant in case of final exams (e.g. final master examination). Recognition only comes into effect upon signature and approval by the Head of the study program. Prior to approval, attendance of the courses is obligatory. N.B. Only complete and correctly filled in forms accompanied by the necessary documents (credit records, certificates, course descriptions) can be processed. Applications received after the deadline cannot be considered.