

Application for admission to the module examinations according to § 9 of the Examination Regulations (PVO)

Registration number				
Name, First name				
Telephone				
E-Mail (stu-Mail)				
Subject			Degree	
Examination Period (PP)	1. PP WS <input type="checkbox"/>	2. PP WS <input type="checkbox"/>	1. PP SuSe <input type="checkbox"/>	2. PP SuSe <input type="checkbox"/>

1. Modul

Code of modul			
Name of modul			
Type of examination		Number of examinations	

2. Modul

Code of modul			
Name of modul			
Type of examination		Number of examinations	

3. Modul

Code of modul			
Name of modul			
Type of examination		Number of examinations	

Declaration of the student

- I declare in accordance with § 9 (6) PVO that I have not lost the right to take the examination and that I am not in an examination procedure at another higher education institution in the same or a subject-related equivalent degree programme.
- I agree to the admission of an audience to an oral examination: yes no

Kiel,

_____ date

_____ Signature of the student