

TU Dortmund University - Corporate Center 4.3: Central Examinations Office -Emil-Figge-Str. 61 D-44227 Dortmund

# Application for Academic Accommodation

#### Personal details

Last Name:	First Name:	Student ID no.:
Street, house no.:		
Zip code:	City:	
Phone/cell phone:	E-mail:	
I hereby apply		
for the degree		
of the subject		

for academic accommodation due to the following health impairments (e.g. sensory impairment, physical or mental impairment, chronic illness, etc.):

The considerable health impairment has the following effects on my studies:

The health impairment and the effects on my studies are documented by a medical or psychotherapeutic certificate.



## Application for Academic Accommodation

Last Name:

First Name:

Student ID no.:

On the basis of the medical or psychotherapeutic certificate, I request the following measures for the examination:

## The application should apply

in principle for the duration of the above-mentioned degree program or

initially for a limited period for the

Winter semester

Summer semester

to all examinations of the following form(s)/formats of performance provision:

written examination

oral exam

other written examinations (e.g. term papers, portfolios etc.)

other form:

#### or the application should apply once for the following test:

Examination acc. to Examination Regulations

Type of examination

Examination date and examiner



#### To be completed by the Examination Board:

Last Name:	First Name:	Student ID no.:

Application for academic accommodation dated:

for the degree

of the subject

Yes, the following measures for academic accommodation are approved:

in principle for the duration of the above-mentioned degree program or

initially limited for the

Winter semester

Summer semester

No, the requested measures will not be approved.

Reason:

Date

Signature

Corporate Center 4.3 - Central Examinations Office

Receipt/Processing:

Notification to Students:

If applicable, message to Examiners:

To archive: