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Landshut University of Applied Sciences Student Service Centre Am Lurzenhof 1 84036 Landshut

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First name and surname:	
Matriculation number:	
Study programme:	
Semester:	

Application date:

Notification of non-attendance or withdrawal from an examination (in the event of short-term inability to take an examination)

	The notification must be submitted no later than 3 days after the inspection!
I hereby apply in acc	cordance with § 25 APO
Failure to an e	examination (= deadline due to failure to attend)
the recognitio	n of withdrawal during an examination (= cancellation of the
examination) for a re	eason for which I am not responsible.
Examination/module number	Name of the examination
Test	Test day and time
Reason:	
Enclosed is evidence1 for	or the above reason:
1. qualified me	edical certificate2 (see information sheet on behaviour in the event of incapacity to
	ations due to illness; certificate of health impairments)
2.	
	(please specify other proof)
Date, signature of app	plicant
	ustification or evidence will be rejected without further enquiry rtificate is always required for a third or fourth attempt
- Till Gillolal Medical Ge	Talloate to always required for a time of loantif attempt
Decision of the exam	nination board/examination committee: The application
is approved.	
	for the examination to be taken is extended accordingly.
The application	on is not granted because
	
Date, signature	
	

Certificate of health impairments that may justify inability to take the examination

Explanations for the attending physician:

If students withdraw from or cancel an examination for health reasons, they must immediately notify the university in writing and provide credible evidence of the illness or the health reasons asserted in accordance with the applicable examination regulations. For this purpose, students require a medical certificate that enables the university to answer the legal question of whether they are unfit to take an examination on the basis of the information provided by a medical expert; i.e. the symptoms of the illness must stated in a form that is understandable even for medical laypersons. A certificate of incapacity for work ("yellow slip of paper") is not sufficient!

Due to their duty to co-operate, students are obliged to disclose their complaints in order to determine their inability to take examinations and, if necessary, to release the doctor treating them from their duty of confidentiality. This does not mean that the doctor must disclose the diagnosis as such. A description of the physical and psychological effects caused by the illness is sufficient. However, stating the diagnosis may be appropriate in individual cases if it comprehensively describes the symptoms of the illness (e.g. feverish cold). This is in accordance with the Data Protection Act. According to Art. 16 para. 1 of the Bavarian Data Protection Act, personal data may be collected if knowledge of it is necessary for the fulfilment of the task of the collecting body.

body.	,				
Details of the person exam	<u>ined</u>				
Surname, first name			Date of birth		
		Se	mester address		
(postcode, town, street, hous	se number)				
Declaration by the doctor					
My examination today on the following from a medical poir	•	ability to undergo e	xaminations has reve	aled the	
Diagnosis (optional):		Expected dura	ation of the		
disease: from to .					
Symptoms of illness/ type of	of performance impairment	: :			
Exam anxiety/ exam stress is	s the cause of the above-me	entioned symptoms			
		□ Yes	□ no		
From my medical point of vie	w, there is a significant imp	airment of the			
performance capacity		□ Yes	□ no		
The health disorder is	ne health disorder is		□ permanent/not foreseeable		
Place, date					
		Pra	actice stamp		
Signature of the doctor					