



Please tick the boxes as appropriate   
Please fill out this form using clear unjoined letters

Request for re-enrollment

from  20...../20..... winter semester  
 20..... summer semester

Personal information:

Name: \_\_\_\_\_ First name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Student registration number \_\_\_\_\_  
Mailing address: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ E-mail: \_\_\_\_\_

I hereby apply for re-enrollment in the degree program named below:

<p>1. Degree: _____ (e.g. Bachelor's degree program) Subject: _____ (e.g. Geography) Subject: _____ (for teaching degree program elementary school and <i>Mittelschule</i>: Didactics combination) Subject: _____ Subject: _____ Study profile: _____</p>	<p>2. Degree: _____ (e.g. Bachelor's degree program) Subject: _____ (e.g. Geography) Subject: _____ (for teaching degree program elementary school and <i>Mittelschule</i>: Didactics combination) Subject: _____ Subject: _____ Study profile: _____</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

(only for the Interdisciplinary Bachelor's and Master's degree program (e.g. flexible, teaching,...)

Justification:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Decision of Student Office:**

Request for re-enrollment was

approved

denied

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Student Office

**STUDENT OFFICE**