

modul	examination subject	examiner	examination	examination date	start time	examination place	Registration / De-registration
M_ESS 1.2	Applied Ecology	Prof. Wesche	written examination 90 min	Fr., 17/05/2024	9.00 am	Humboldtsaal, Platz des 17. Juni 2, 02826 Görlitz	Anmeldung über OPAL: 22.04. - 05.05.2024
M_ESS 1.3	Introduction into Key Taxa	Prof. Wesche/ Dr. Ritz	written examination 90 min	Mo., 03/06/2024	10.00 am	Humboldtsaal, Platz des 17. Juni 2, 02826 Görlitz	Link: https://bildungsportal.sachsen.de/opal/auth/repository/catalog/29728538632 Abmeldung: bis 3 volle Tage vor dem Prüfungstermin möglich (Formular anhängend)
M_ESS 1.5	Intercultural Communication and Foreign Language Skills	Herr Tettenborn/ Frau Wächtler/ Herr Fraser/ Frau Dr. Vogel	written examination 120 min	Thu., 06/06/2024	2.00 pm	1.50	Registration via OPAL: 22.04. - 05.05.2024
M_ESS 2.9	Environmental Chemistry	Prof. Fränzle	written examination 90 min	Tue., 14/05/2024	10.00 am	0.04	Link: https://bildungsportal.sachsen.de/opal/auth/repository/catalog/29728538632 De-registration: possible up to 3 full days before the examination date (Form attached)
M_ESS 2.10	Environmental and Fungal Genomics	Dr. Kellner	written examination 90 min	Tue., 28/05/2024	10.00 am	0.04	

Bitte beachten Sie auch unsere Internetseite: <https://tu-dresden.de/ihl-zittau/studium/pruefungsamt/wiederholungspruefungen>

Please also take a look at our website: https://tu-dresden.de/ihl-zittau/studium/pruefungsamt/wiederholungspruefungen?set_language=en

**Binding withdrawal from module examinations or
examinations during the core examination period**
(including repetition/repeat)

Withdrawal is possible without giving reasons up to 3 days before
the examination date.

Name: First name:

Study programme: matriculation nummer:

Name of the module examination or examination performance	Exam date	Audit status*

* 1. - regular 1st attempt / NH - make-up exam (due to withdrawal, illness or similar) /
WP - repeat examination

I have provided all information truthfully, in particular regarding the status of examinations as repeat examinations. I am aware of the relevant conditions for proper participation in the examinations from the examination and study regulations, in particular also the conditions for proper withdrawal (e.g. in case of illness). I am also aware of where and how I can obtain information about the exact dates, locations and possible postponements of the examinations.

place, date
(handwritten signature)

Note of receipt:
(signature examination office)