**TECHNISCHE UNIVERSITÄT DRESDEN**

Fakultät Informatik - Prüfungsamt

# Application for Acknowledgement of Previously Completed Courses or Examinations

**Student's Personal Data:**

Name: _____     First Name: _____

Date of Birth: _____     Semester: _____

Student ID: _____     E-Mail: _____

Previous Study Course: _____

Current CMS Track: _____

**The courses and examinations listed below were completed at the following institution (file separate forms for applications concerning courses from different institutions):**

_____

(Name of Institution)

**Note: If there are credits acknowledged with this application, which were achieved outside of the study course, a study period may be recognized ex officio. This may increase the number of semesters studied.**

I made the following prior applications for acknowledgment of completed studies or examinations:

| Date of Application | Amount of credits acknowledged | Amount of semesters increased thereby |
|---|---|---|
|  |  |  |
|  |  |  |

Hereby, I apply for acknowledgement of the following study and examination results within the above-mentioned study course as listed on the second page of this application.

I confirm that I have not failed any module examination or a comparable examination of the above-mentioned study course in the final attempt.

- I confirm that the courses/modules mentioned on the second page of this application have not been acknowledged for any other study courses and that no such acknowledgement process is pending when this application is submitted.

- The courses/modules mentioned on the second page of this application have already been acknowledged for another study courses.

Name of the study course: _____

Name of the institution: _____

Specify in the table below the titles of the related courses/modules to be acknowledged and include extent (SWS) or credits and grades (if available). Additionally, add a proposal for the equivalent courses/modules according to the study and examination regulations of the current study course. **Certificates must be presented in original!** This application must be forwarded to the persons in charge of the courses/modules to have them accepted by signature and stamp. Afterwards this form must be submitted to the examination board via the examination office.

| Courses/modules to be acknowledged | | | Proposal of equivalent CMS course/module | | Proposal of equivalent CMS course/module | |
|---|---|---|---|---|---|---|
| Title of course/module | SWS/ Credit | Grade | Title of equivalent course/module | SWS/ Credit | Grade | Stamp/Signature |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

**Note: ECTS credits can be acknowledged for completed modules only.**

Date: _____ Signature Student: _____

**To be completed by the examination board:**

(please tick as appropriate)

*Please consider the § 16 of the CMS examination regulations.*

    ☐    The application for acknowledgement has been accepted as proposed.

    ☐    The application for acknowledgement has been rejected for the following reasons:

_____
_____
_____
_____
_____
_____
_____

    ☐    Based on this application for acknowledgement of completed studies or examinations, _____ credits will be acknowledged in total.

    ☐    Based on this and/or prior applications for acknowledgement of completed studies or examinations, a study period amounting to ____ semester(s) is recognized ex officio.

Date: _____    Stamp, Signature: _____

**Attachments:**

Course/Module description form (to be completed by the applicant on request only)

<u>Legal information:</u>

The applicant may take legal action against this notification within one month upon receipt. Please submit your appeal in writing to the CMS examination board via the SCIS, Faculty of Computer Science, Technische Universität Dresden, 01062 Dresden.