



Application for Transfer of a Course into a CMS-Module

Student's Personal Data:

Name: _____ First Name: _____

Date of Birth: _____ Semester: _____

Student ID: _____ CMS Track: _____

This form must be completed by the student. The student requests that the following course (separate forms must be filled for multiple courses) is accepted and assigned for the following CMS module. The course is currently not listed in the catalogue of that module.

Name of the course	SWS (course)	Number/acronym of the CMS-Module to be transferred in

Detailed contents/syllabus of the course:

If available, website of the course:

Name and e-mail address of the lecturer:

Date: _____ Signature (Student): _____

The head of the CMS module into which the course shall be transferred confirms that the course form, contents, and type of examination are in accordance with the respective module description.

Date / Signature (Head of the CMS Module)

The head of the CMS examination board approves the transfer.

Date / Signature (Head of the CMS Examination Board)

Please return the signed form to the Examination Office!