

Application for deadline extension

Personal details:

Last name: _____ first name: _____ Matriculation number: _____
Telephone: _____ E-Mail: _____ Semester of study: _____
Correspondence address: _____

I hereby apply for an extension of the processing time for my thesis.

Specification of the period (by a maximum of 8 weeks)

In the Bachelor's degree programme Master's degree programme
with the **designation:**

I am enrolled in the above-mentioned degree programme in accordance with the study and examination regulations of _____ and am working on the following topic:

with

(name of the supervising examiner).

The beginning of my thesis was the:

Previous submission date:

- No extension has been granted to date.
 There is already an authorised extension of _____ weeks.

The following problems occurred while working on my Bachelor's thesis Master's thesis,
for which I am not responsible:

Health impairment: A medical certificate **or alternatively**, the completed medical declaration on the following page, that comprehensibly describes how and in what period of time the processing of my thesis will take due to my health situation, I enclose with this letter.

Proof/ medical certificate/ certificates

Technical problems with the processing of my thesis: I enclose a written confirmation of my supervisor, who agrees to the extension, is enclosed with this letter. It must be stamped and signed.

Other reasons: I will provide evidence.

For FIM students only:

Written proof that I have informed my supervising examiner about the situation and the application is enclosed.

Passau, the

If more information is required, please use another sheet. After approval or rejection by the examination board, a written notification will be sent to you by the examination office.

Medical declaration

It is the **responsibility of the Examination Office** to assess the examination eligibility of the above-mentioned student on the basis of your qualified information. Please do **not describe the diagnosis, but the symptoms**, i.e. the physical or psychological effects caused by illness that lead to the impairment of the ability to take examinations. Fluctuations in daily form, exam anxiety, exam stress or similar are not symptoms that justify a significant impairment.

Due to their duty to co-operate, students are generally obliged to disclose their complaints in order to determine their inability to take examinations and, if necessary, **to release you from your duty of confidentiality**.

I certify the following symptoms of illness and impairment (please explain in layman's terms):

Health impairment is (please tick): permanent, for an unforeseeable period of time temporary

Duration of symptoms of illness: from _____ up to an including: _____

Place, Date

Stamp and signature of the doctor