## TUM School of Medicine and Health Technical University of Munich

in the

ПШ

To the Examination Board Uptown München Campus D Georg-Brauchle-Ring 60/62 80992 München

## Application for recognition of already completed study and examination achievements

summer semester 20\_\_\_\_

winter semester 20\_\_\_\_

Applicant (stu	ıdent)						
Name:					Matriculation numb	er:	
Study prograi	m:				Semester of Study:		
TUM E-Mail:					Phone:		
Required doc	uments (to I	oe sub	omitted by mail as a pd	f docur	nent):		
<ul><li>Proof</li></ul>	of academic	achie	ly filled out application fevement (transcript of re ne achievement to be re	ecords	, certificate)	ture	
			evement as part of my see recognized for my stu				
Name of the	university:						
Study program:							
Module number and title:							
Credits:	Grade:		Contact hours (if known):		Acquired in sem	ester:	
demic year.  I hereby apply TUM School			on of the above-mention lealth:	ned ac	nievement for the	followir	ng module of the
Module numb	er and title:						
Credits Gr		rade (to be completed by the module responsible):					
Date and place	ce		Siç	gnature	applicant (studen	t)	
achieved ach regarding	ievement wi the TUM mo	th reg dule	he above-mentioned To ard to the learning outo gnificantly from the TUN	comes	(see also APSO §	16)	at the externally
		ficantl	y from the TUM module			,	ction stating the
Date and place			Signature module responsible				