

## **Application for special arrangements for examinations**

Name:

Matriculation number:

Course:

Date:

**I have the following impairment/disability/chronic illness.**

I will have the above impairment

permanently

probably at least until \_\_\_\_\_

**Effect the impairment has on studying/examinations/certain classes/certain types of examination:**

**Owing to the impairment outlined above, I am applying for the following special arrangements for the following classes/examinations/types of classes/types of examinations:**

**The following evidence (e.g. doctor's certificate) is included with the application:**

Hamburg, \_\_\_\_\_

\_\_\_\_\_ (Applicant's signature)