



To the SSC/ SSSt
E-Mail address SSC/SSSt:

Application for Recognition of Examinations, other academic achievements, activities and qualifications (according § 78 UG) (SL/A1-en)

Student details (to be filled out by the student)

Last name:	
First name:	Student ID:
Phone (optional):	E-Mail (u:account):

Details of the curriculum for which recognition is to be granted (to be filled out by the student)

Degree programme code (as it appears on the student record sheet): UA			
Degree programme (as it appears on the student record sheet):			
Bachelor's	Master's	Diploma	Doctoral programme
BEd	MEd	Complementary BEd	Complementary MEd
Extension curriculum (EC) within a bachelor's programme			
Start of studies (for EC, the start date of the bachelor's programme is relevant):			

Signature of the student

I hereby confirm that I have checked my personal data via u:space for correctness and completeness and have completed/corrected the data.

Date _____ Signature of the student _____

Information concerning the recognition:

- All documents required for the assessment must be enclosed with the application.
- Notarised translations of foreign-language documents must be enclosed.
- The SPL will issue a decision within a maximum of 2 months. Once the decision becomes legally binding the recognition is unalterable.
- Recognition is regarded as examination; additional completion of the examination is not permitted.
- If the examination is passed before the end of the recognition procedure (legal validity of the decision), the legal interest in a decision ceases to exist due to a change in the relevant circumstances.
In this case, the procedure is discontinued by means of a file note.

Attention: Other professional or non-professional qualifications must first be positively validated before recognition can be applied for.

to be filled in by SSS:

Excel

angelegt

i3v übernahme

Kommentar

ABXDP-

To be filled in by the applicant:

I already have courses with a total of _____ ECTS in “Alternative Erweiterung”

I hereby apply for recognition of the following exams/courses.

Course/ Module code	Course title	ECTS / SSt. / Hrs.	Date of examination / Issue of transcript	Grade	To be recognised as
					Alternative Erweiterung (up to 15 ECTS) ECTS

First Name

Surname

Student Number

ABXDP-

I hereby apply for recognition of the following Extension curriculum, which I completed during my past studies:

Name of programme: UA _____

Course code	Course title	ECTS	Date of examination	Grade	To be recognised as
					Erweiterungscurriculum (up to 30 ECTS) ECTS UA _ _ _ (EC code)

First Name

Surname

Student Number

ABXDP-

I hereby apply for recognition of the following Extension curriculum, which I completed during my past studies:

Name of programme: UA _____

Course code	Course title	ECTS	Date of examination	Grade	To be recognised as
					Erweiterungscurriculum (up to 30 ECTS) ECTS UA _ _ _ (EC code)

First Name

Surname

Student Number

ABXDP-