

Declaration of inability to participate in examinations due to illness

- form for submission to the examination office -

Explanation for the physician:

If a student does not appear for an examination for health reasons or discontinues the examination, he/she must provide credible evidence of the illness in accordance with the general examination regulations (Part A). For this purpose, he/she requires a medical certificate which allows the examination board to answer the legal question of whether the candidate is fit to take the examination. Therefore, a description of the illness-related limitations is required, from which the examination board can draw conclusions about the impairment at the time of the examination. It is not necessary to state a diagnosis.

Note: This certificate may also be issued informally, provided it contains the following information.

- to be filled out by the physician -

Student's information:

Last name, first name: _____

Date of birth: _____

Address: _____

Examining physician's statement:

Please note that information must be provided for each number listed below!

- From my medical point of view, there is a considerable impairment to the student's ability to perform and/or the student is prevented from participating in
 f all only written only oral examinations in the specified period due to illness.
- Duration of the illness or impairment: from _____ up to and including _____
- The health issue can be traced back to stress or examination anxiety: yes no

Note:

Examination anxiety or stress are generally regarded as part of the risk to which all exam candidates are exposed and therefore do not constitute a significant impairment in the sense of an inability to take an examination. Examination anxiety or stress only entitle the candidate to withdraw from the examination if they amount to the severity of a mental illness.

The health issue is permanent for an unforeseeable period of time
 temporary

- family doctor/ public health other (e.g. emergency doctor)
 general practitioner officer
 (Arzt) (Amtsarzt)

Stamp of the medical practice

Name of the doctor/physician: _____

_____ Date

_____ Physician's signature:

Explanation for the student:

In the event of illness, a medical certificate stating the duration of the inability to participate in examinations must be submitted **immediately** (i.e. without culpable delay) and **must be issued no later than on the day of the examination** - if necessary, an on-call doctor or an emergency doctor must be consulted. If the certificate is submitted to the examination office within three working days of the examination date, the condition of immediacy is regarded as fulfilled without further justification.

A medical certificate can only be accepted if the physician certifies the inability to participate in examinations. A certificate of incapacity for work (yellow or pink slip) or a certificate with the wording "not able to study" or "cannot attend university" **does not meet the requirements!** In addition, the certificate must contain the physician's signature and the stamp of the medical practice - the form on the back of this page can be used for this purpose.

The Jade University of Applied Sciences will not cover the costs for medical certificates.

Student's declaration of non-attendance due to inability to take examinations:

Last name, first name: _____

Student enrollment number: _____

Study program: _____

Due to the illness noted on page 1, I am unable or was unable to attend the following examinations
(Indicate all registered examinations that fall within the certified time period.)

Date of the examination	Name of the exam

Date

Student's signature