

FlexNow REGISTRATION*) and DEREGISTRATION*)

I hereby request

Surname, First Name:

Matriculation Number: **Study Program:**

Registration*) / Deregistration*) in FlexNow in WT / ST for the Event

Number: **Title:**

.....

Module:.....

Teacher:.....

Justification:

.....

- First Attempt Repetition Grade Improvement

Regensburg (Date)

Sign (Student)

TO BE COMPLETED BY THE TEACHER

Registration*) / Deregistration*) approved*) / declined*) Date:

Title of the paper:

.....

Grade:

Sign (Teacher)

TO BE COMPLETED BY THE SECRETARY

Registration*) / Deregistration*) takes place on Date:

.....

Sign (Secretary)

***) Please delete where not applicable**

Please note: Only completely and legibly filled in applications will be processed!