.....

Last name, first name, enrolment number

.....

Address, phone, e-mail address

.....

As of Winter Semester / Summer Semester, enrolled in the _____semester of study

To the

☐ Board of examiners (bachelor's)

☐ Board of examiners (master's)

for the degree programme

.....

at the University of Bayreuth

95440 Bayreuth

Request

I hereby declare that I wish to organize my studies in the degree programme

☐ bachelor's .....

☐ master's .....

according to the study and examination regulations dated

.....

(enter date of the regulations / amendments)

I am aware that I cannot revoke this declaration.

Yours sincerely,

.....

Place and date of signature , Signature

Submit German version

Do not submit-This translation is to be used as a guide for filling out the German original.
The University of Bayreuth is not liable for inaccuracies or mistakes in the English translation.
In case of doubt, the German originals are to be used in a court of law.