

**Application for compensation for disadvantages  
to the examination board**

Department 3.1 Enrolment and Examination Office

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To the  
Enrollment and Examination Office  
Jade University of Applied Science Wilhelmshaven/Oldenburg/Elsfleth

The application must be submitted to the Enrollment and Examination Office.

**Examination board of the faculty**

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(Date)

**Application for compensation for disadvantages**

*(Note: In principle, the application for compensation for disadvantages must be submitted with the examination registration.)*

**Details of the applicant:**

<b>Surname, First name</b>	
<b>E-Mail (only HS-Address)</b>	
<b>Registration-Number</b>	
<b>Start of study</b>	
<b>Study programme</b>	
<b>Subject/scope:</b>	<b>Period (semester)</b> <input type="checkbox"/> <b>Exam date</b> <input type="checkbox"/> <b>Similar forms of examination (written examinations/specific study situations/examination performance)</b>
<i>Exact description:</i>	

**Reason:**

**Impact on the audit as follows (precise description):**

**Precise description of possible compensatory measures:**

*(e.g. time extension of the examination, a change in the form of the examination or the required aids - certified by the doctor)*

**Enclosed evidence:**

- Copy of severely disabled person's pass or assessment notice from the pension office
- Statement from the university's Disability Officer
- Copy of maternity passport, birth certificate or proof of parental leave
- Specialist medical certificate (with a concrete description of the impairment and the resulting compensation for disadvantages)
- Copy of certificates from (specialist) doctors, if necessary also statements from authorised psychological psychotherapists
- Statements from rehabilitation organisations or approval notices from integration assistance organisations
- Other: \_\_\_\_\_

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- If compensation for disadvantages is granted, I will contact the examiner directly to make arrangements.

(Important: The applicant will receive notification of the examination board's decision from the examination office. If compensation for disadvantages is granted, the examiner should be given sufficient opportunity to prepare for the changed modalities of the examination. We therefore recommend that the applicant informs the examiner at least 14 days before the examination date).

- Required aid(s) (e.g. a special chair, table, laptop, etc.):
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I request that my application be reviewed and compensation for disadvantages be granted.

Yours sincerely

\_\_\_\_\_  
(Signature of student)

**Processing instructions from the examination board:**

<b>Application processed on:</b>	
<b>Application approved:</b>	<input type="checkbox"/> yes <input type="checkbox"/> no
<b>Reason for rejection:</b>	
<b>Chairman of the examination board:</b>	
<b>Date:</b>	
<b>Signature:</b>	

**Notes on measures:**

- A \_\_\_\_\_ % -time extension or a time extension of \_\_\_\_\_ minutes.
- An interruption of the examination by additional breaks.
- The use of the following aids or personal assistance:  
\_\_\_\_\_
- Equivalent performance in a form other than that provided (e.g. conversion from written to oral examination or vice versa), namely:  
\_\_\_\_\_
- The assignment of a separate processing area.
- Other: \_\_\_\_\_