

Application form for dispensation

1. Personal details:

Danish CPR-number (or your birthday DD.MM.YY in the case you do not have a Danish CPR-number):

First name(s):

Surname:

Phone number:

E-mail:

Address:

Zip code:

City/Country:

2. Please inform whether you have resigned from your former institution yourself, or whether the institution resigned you (use the spacebar to mark):

- I resigned myself on the following date: _____
- I was resigned by my former institution on the following date: _____

3. Please state the reason why you resigned yourself or the institution resigned you (use the spacebar to mark):

I have used my third examination attempt

I did not pass the study start test

I did not meet the requirements of participation or passing of the first year test.

I am permanently expelled from the University that I was former enrolled to.

Other, what?: _____

4. Based upon the following I seek permission to apply for admission to a study program in which I have former been enrolled to (use the spacebar to mark):

- I can document that I have significantly improved my possibility to complete the study program.

Other, what?: _____

5. Remember to attach the following documentation to your application:

Examination copy including all examination attempts, reason for resignation, any rejections of former dispensations applications, any medical certificate and/or psychological report you might have.

6. Additional comments (clarification of your application):



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