

Application for double enrollment at the University of Bremen

Name, First name: _____ Matr.-Nr.: _____

Street: _____

Zip Code, Residence: _____

Phone: _____

E-mail: _____

To my studies with the degree: _____

and the subject(s): _____

I apply for enrollment in the following additional course of study

Degree: _____

Subject(s): _____

Justification see annex A

According to §34 paragraph 1 Bremisches Hochschulgesetz (BremHG), students can only be enrolled for a further degree program if this makes sense with regard to the study objective.

According to § 4 paragraph 6 Immatrikulationsordnung of the University of Bremen this has to be certified by the examination board of the first chosen study program.

The above request is approved by the examination board of the first chosen degree program.

Bremen, _____

(Date, Signature Chairperson of the Audit Committee / **Seal**)

Annex A

Name, First name

Already enrolled for:

Desired further studies:

Justification:
