



Medical form for examination exemption (according to the examination regulations of the respective degree program)

A To be completed by the student:

Surname, first name
(of the student): _____ Matr.-No. 90 _____

Study Program: _____ Location:
☐ Sankt Augustin / ☐ Rheinbach

☐ Bachelor BPO Version:20 _____ ☐ Master MPO-Version: 20 _____

The medical certificate should be valid for the following examinations:

Exam date	Exam title	Exam number

☐ Application for an Extension of the submission deadline for **the final thesis**

☐ Extension of write time for **another written paper**

Previous submission date: _____

Date, signature of the student

B To be completed by the attending doctor:

Medical certificate:

From a medical point of view, my examination of the above-mentioned patient today revealed the following:

Inability to take an examination yes ☐ no ☐

Duration of inability to take the examination (please enter the specific date)

From _____ to _____

Date, doctor's signature and practice stamp

Please note the following information:

The medical form for examination exemption

- must be issued on the day of the examination at the latest,
- must be scanned or photographed immediately, but no later than the 3rd working day after issue (including the day of examination) and sent by e-mail to the relevant address. It suffices to submit the scan/photo of page1.
It is not necessary to send it by post.

Study programs at the Sankt Augustin campus (CA)

For the department of Business Sciences in Sankt Augustin

Bachelor / Master: attestFB01CA@h-brs.de

For the department of Computer Science

Bachelor: attestFB02@h-brs.de

Master: attestmasterFB02@h-brs.de

For the department of Engineering and Communication

Bachelor: attestFB03@h-brs.de

Master: attestmasterFB03@h-brs.de

For the department of Social Policy and Social Security Studies

Bachelor: attestFB06@h-brs.de

Master: attestFB06master@h-brs.de

Study programs at the Rheinbach campus (CR)

For the department of Business Sciences in Rheinbach

Bachelor: attestFB01CR@h-brs.de

Master: attestmasterCR@h-brs.de

For the department of Natural Sciences

Bachelor: attestFB05@h-brs.de

Master: attestmasterCR@h-brs.de

Important! Students are obliged to submit the original medical certificate at the request of the examination board. Please keep the original. The retention period is one year from the date of issue.