

By email¹
To the
University of Oldenburg
Division 3 - Examinations Office

**Notification of an illness in the examination procedure
(inability to take the examination)**

Last name, first name	Date of birth	Student ID number
Degree programme	First subject (for 2-subject degree programmes)	

I would like to notify you that a medical examination has shown that I have a health impairment which has a considerable effect on my performance with regard to examinations. Due to this impairment, I am unable to take any examinations from a medical point of view.

Module short name ²	Date of the examination	Type of examination	Last name, first name of examiner

Duration of inability to take examinations

from	to
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Place, date

Name, first name of student



Important notes

- Paperless procedure by communication via the email address assigned by UOL; signatures or printouts are not required.
- The notification must be supported by medical proof of the inability to take examinations. Notification of inability to sit examinations and proof thereof must be submitted to the Examinations Office without delay.
- The submission of a certificate of incapacity for work is accepted as proof, unless another form has been requested. The proof must contain a statement on the expected duration of the inability to take examinations.
- The notification and proof should be sent to [Academic Examination Office](#). Make sure that the quality of the proof is impeccable.
- The information you provide will be treated confidentially.

¹ Contact details: [here](#).

² Short name according to examination regulations/subject-specific annex (e.g. biw040)