

## DECLARATION OF WITHDRAWAL

### 1. Declaration of the candidate

Last name, first name: \_\_\_\_\_

Address: \_\_\_\_\_

I hereby withdraw from the exam for the course \_\_\_\_\_.

- in due time (stating the reasons)\* and requesting an alternative exam date
- in due time (without stating the reasons)  
[Please note. In this case, the exam can only be taken at the next regular exam date of the corresponding module / course in the ensuing study year. Therefore, the MBA degree may be completed one year after the end of regular studies]
- after expiration of the deadline for withdrawal owing to medical reasons or pressing professional commitments\*  
- and request / do not request an alternative exam (please cross out the non-applicable option)  
(please cross out the non-applicable option)

\* In this case, a written explanation (or, in case of a medical problem, a doctor's statement) must be attached!

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

### 2. Statement of the examiner (only required in the event of a withdrawal for which a reason is stated!)

Examiner: \_\_\_\_\_

- Alternative exam date offered.

Date: \_\_\_\_\_

Exam location: \_\_\_\_\_

Type of exam: \_\_\_\_\_

- No alternative exam date offered.

The candidate has been informed of my decision:  yes  no

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

**Please forward this declaration to the Exam Committee immediately!**

**Prüfungsausschusses der Wirtschaftswissenschaftlichen Fakultät der  
Heinrich-Heine-Universität Düsseldorf für die Master-Studiengänge an der  
Düsseldorf Business School GmbH (DBS)**

C O N T A C T

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