

Disclaimer

This document is a courtesy translation provided for your convenience. Please note that the original form must be opened and completed in the **German language**. Only the **German version** is legally binding.

Please complete the document electronically and send it by email to anrechnung@th-brandenburg.de !

Application for Individual Recognition of Professional Competencies/Qualifications

Surname, first name:

student ID number:

Vocational training:

module:

Note: The application must be submitted for each module.

The **following** documents must be enclosed with the application (**PDF files only**):

- ☐ Curriculum
- ☐ Portfolio (complete the following pages)
- ☐ Certificates
- ☐ Certificates, etc.

I confirm that all the achievements listed have been made by me and that all the information provided is correct.

Date

Signature of applicant

To be completed by the Examination Board:

The module applied for will be credited on the basis of proven professional competencies and qualifications.

☐ Grade: Pass

The requested module cannot be credited on the basis of proven professional competencies and

qualifications ☐.

Date

Signature of the Examination Board

The application for credit transfer can be submitted by email no later than 8 weeks after the start of each semester (01.03./01.09.) (in accordance with §10 (5) of the RO-Brandenburg University of Applied Sciences dated 12.10.2022). Applications submitted after the deadline will not be considered!

Vocational training

General information **Educational**

qualification/vocational training

Training company

Period

Relevant activity and learning outcomes

Relevance to the selected module (see module catalogue)

Proof

Relevant activity in:

Learning outcomes ([help](#))

Assessment of learning outcomes

at level ([help](#))

Please select:

Professional experience/internships

General information

Type of position

Employer

Position/period

Relevant activities and learning

Relevance to the selected module (see module catalogue)

Proof

outcomes Relevant activities in:

Learning outcomes ([help](#))

Assessment of learning outcomes

at level ([help](#))

Please select

Further

General information **Further training**

measure Institute/educational

institution

Period

Relevant activity and learning outcomes

Relevance to the selected module (see module catalogue)

Proof

Relevant activity in:

Learning outcomes ([help](#))

Assessment of learning outcomes

at level ([help](#))

Please select

General

General

**Type of activity/commitment, e.g.
association/institute/similar**

Position/period

Relevant activity and learning outcomes

Relevance to the selected module (see module catalogue)

Proof

Relevant activity in:

Learning outcomes ([help](#))

Assessment of learning outcomes

at level ([help](#))

Please select

COURTESY TRANSLATION