



Closing Credit-Point-Account

Matriculation Number:	Semester:
Last Name:	First Name:
Date of Birth:	Place of Birth:
E-Mail (private):	Phone:

I would like to assign the following performances as follows:

Title of the Course	Previous Focus Area	To Focus Area (Change)

- I agree for my personal data (name and e-mail address) to be transferred to the alumni department of the school of Business and Economics. This way, I am able to receive information for alumni offers and how to participate at the yearbook.
- With my signature, I confirm that I will not participate in any further examinations. In addition, I would like to receive my final certificate at the next graduation ceremony.

Tübingen, the _____ (Date) _____ (Signature)

Not to be filled out by the student:					
_____	_____	_____	_____	_____	_____
Datum	Hz	Datum	Prfg	EDV	

To request a provisional certificate, go to pruefungsamt@wiso.uni-tuebingen.de.