Application to Change Subjects within the Bachelor's Degree Program in Sport, Exercise and Health (Faculty of Medicine)

This application requires completion of the semester registration process via MOnA (https://services.unibas.ch) and is to be submitted to the Student Administration Office (Studiensekretariat) together with the MOnA supplementary sheet in person by 21 August 2017 at the latest.

Students matriculated at the University of Basel can change their programs, but do not enjoy any special privileges. In particular, please observe the registration and admission requirements.

Family name: ____________________________________
First name: _____________________________________
Matriculation Number: ____________________________

I am applying to change the extra-faculty subject within the bachelor's degree program in Sport, Exercise and Health (Faculty of Medicine) for the fall semester 2017:

Subject: Sports science (unchanged)

New extra-faculty subject: __________________________________________________________
Replaces: __________________________________________________________

Reason: _________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Have you been definitely expelled from continuing studies in any study program at a Swiss or foreign institution of higher education?
☐ No ☐ Yes, in the following study program: __________________________________________
☐ Appeal pending

Date: __________________________ Signature: ____________________________

For official use only:
☐ Neuimmatrikulant ☐ Nein ☐ Ja ☐ Ja ☐ Nein
Vorbildungsausweis __________________________________________________________________
Zweitstudium Fachstudienanfänger Hörerart __________________________________________
☐ Ja ☐ Nein ☐ Ja ☐ Nein Studienabschnitt ____________________________________________
Antrag bewilligt ______________________________________ Campus i. O. ________________