Cover sheet for written exams on site under COVID-19 conditions

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| PLEASE NOTE: You must not open the exam papers until instructed to do so by the invigilators. |

 **Course exam**  **STEOP module examination**  **Module examination**

(Please tick as appropriate)

**Exam details** (to be completed by the lecturer / the SSC)

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| Course (course number and group number/ teaching contents number, semester, designation): |
| Lecturer(s): |
| Exam date (date, time): |
| Exam duration (amount of time to work on the exam in minutes): |
| Venue of the exam: |
| Grading key: Students have to answer xy questions for X points each. Include any additional information in the case of multiple-choice exams here, if needed.Grading scale: Maximum number of points (%): XX from <XX>  1from <XX>  2from <XX>  3from <XX>  4less than or equal to <XX>  5 |

**Student details** (to be completed by the student)

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| Student ID number: |
| Degree programme code as it appears on the student record sheet: UA |
| Degree programme as it appears on the student record sheet: |
| Surname(s): |
| First name(s): |
| Is this your fourth attempt?  YES  NO**Please note: The fourth attempt must be before an examination committee.** |

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|   | Seat (see label at the seat) |

Study law-related information for students

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| **Assessment is only permissible if:******you are correctly registered for this exam,****you meet the requirements for this exam,****your identity can easily be verified (student ID card or any other official photo identification card),****you do not use unauthorised aids (your lecturer informs you about the permitted materials before the beginning of the exam).****If you discontinue your exam without good cause, you will fail the exam and receive the grade "insufficient". |

Signature of the student

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| **I confirm that I******am duly registered, have taken note of the examination modalities and procedure and thestudy law information.****am not subject to any relevant COVID-19 travel restrictions or have been segregated by****health authorities.****have not experienced any COVID-19 symptoms in the past 48 hours.****have not been classified by health authorities as a contact person of an infectious case.****have at the time of the examination a valid proof that I have been tested, vaccinated or recovered****("COVID-19 access test"). |

Date

Signature of the student

Special incidents during the exam

(to be completed by the lecturer or invigilator only)

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| Description of the incident (if there is not enough space, please use the reverse) |

Date, time

Signature