**Application for the approval of individual- study activities during the advanced- study period and for their retroactive financial support**

For administration only:

|  |  |
| --- | --- |
| Eingegangen am: |  |
| Bearbeitungsnr: |  |

**1. Applicant**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last name, first name: |  | | | | | | | | |
| Street address: |  | | | | | | | | |
| Zip code, city: |  | | | Matriculation number: | | |  | | |
| E-mail address: |  | | | Telephone number: | | |  | | |
| Study program: |  | | |  | Bachelor | |  | Master | |
|  |  | | |  | Lehramt | |  | Staatsexamen | |
| Current degree: | | Bachelor:  yes  / no | Semester in Master: | | |  | Semester total: | |  |

**2. Type of individual-study activity**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Research-lab | | |  | Bachelor-/Master-thesis | | | |  | Conference | | | | |  | Exhibition | |
|  | with ECTS: yes  / no | | |  |  | | | |  |  | | | | |  |  | |
|  | Research project | | |  | Workshop | | | |  | Further internships | | | | |  | Other | |
| Start of the activity: | | | | | | |  | | | | | End: | | |  | | | |
| Institution/University, City, Country: | | | | | | |  | | | | | | | | | | | |
| Research group: | | | | | | |  | | | | | | | | | | | |
| Topics or theme of the individual activity: | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | |
| Motivation: | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | |
| If possible: result/ contribution | | |  | Research/lab report | | | |  | Bachelor-/Master-thesis | | | |  | Lecture | | |  | Poster |
|  | | |  | Other: | | |  | | | | | | | | | | | |

**3. Estimated expenses for which financial aid is applied**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Singular travel expenses (arrival-  und departure to the residence) | |  | Rental fee/accommodation(s) |  | Other (e.g. Visa) |
| Short list of expenses for rent, travel and others (Euro): | | | | | | | | |
|  | | | | | | | | |
|  | | | | | | | | |
|  | | | | | | | | |
| Total costs (Euro): | | |  | | | | | |

**4. Additional Support**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I have applied at other organisations to receive financial aid: | | | | | yes  / no |
| Sources such as Erasmus, PROSA, DAAD, etc.: | | | | |  |
| The official letter is still pending: | | | | | yes  / no |
| I receive further financial aid for my activity: | | | | | no |
|  | Yes, I received/will receive payments (e.g. salary of an institution, state, grants) from the following sources: | | | | |
|  |  | | | | |
|  | I receive payments in the amount of |  | Euro | |

**5. Declaration of the applicant**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I confirm the accuracy of this statement and affirm that the individual-study activities will advance my education. I have read the handout on applying for support. I will provide original invoices/receipts for all incurred expenses for which financial aid is applied. I understand that the aid is only possible for students in the 5th semester and higher and that it can be given only retroactively. | | | | | |
|  | | |  | |  |
|  | |  | |  |
| City, Date | |  | | Signature | |

**6. Statement of a full professor of Faculty 18**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I confirm that the above study activities will advance the applicant’s education. The applicant is known to me and will benefit from these activities. | | | | |
|  | |  |  | |
|  |  |  | |
| City, Date | | | Signature | |
|  | | | Prof. Dr. |  |
|  | | |  | (in printed letters) |

**7. Decision of the Dean**

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| --- | --- | --- | --- | --- | --- | --- |
|  | Positive, amount of support: |  | | | | |
|  | | | | | | |
|  | Negative, reason: |  | | | | |
|  | | | | | | |
|  | | |  |  | | |
|  | | |  |  | | |
| City, Date | | | | | Signature | |
|  | | | | | Prof. Dr. |  |
|  | | | | |  | (in printed letters) |

**8. Administration**

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant notified on: | | |  |
|  | |  |  |
|  |  |  |
| City, Date | | | Signature |