**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**

|  |  |
| --- | --- |
| 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: |
|       |
|       |
|       |
| Motivation: |
|       |
|       |
|       |
| 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**

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| --- |
| 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**

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

**8. Administration**

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