

.....
Family name(s), Given name(s)

.....
Place, date

.....
Street and house number

.....
Postcode Town/city

**University of Passau
International Office
Attn: Ms Verena Rothkopf
Innstr. 41
94032 Passau**

Receipt stamp of the University

Application for an Oskar-Karl-Forster scholarship

I hereby apply for:

- ☐ a one-off scholarship to purchase books or other learning materials
☐ a scholarship to cover part of the printing costs for my doctoral thesis

Please use print letters or word processing equipment. You must sign your application before handing it in. Incomplete applications will not be considered.

Gender: ☐ male ☐ female
Family name(s):
Given name(s):
Date of birth: Matriculation number:
E-mail address:
Degree programme:
Number of semesters studied on the programme (incl. current):

Have you previously received an Oskar-Karl-Forster scholarship at any time during your studies?
☐ Yes ☐ No

Please pay the funds into following bank account:

Account holder's name:
Bank name and address:
IBAN:
BIC:

Privacy notice and declaration of consent

You are free to decide whether you wish to submit the above personal information to us; however, please be aware that we are unable to process your application if you do not.

Declaration of consent:

Your personal data will be used on our IT systems **exclusively for the purposes of your application for financial support**. Your data will only be forwarded to the members of the committees of the University of Passau entrusted with the task of selecting the scholarship recipients and the employees of the University of Passau tasked with the administration of the scholarship; **the data will not be forwarded to any third parties without your express consent.**

I hereby agree to the processing of my data as indicated above.

.....
Place, date

.....
Applicant's signature

In order to better process your application, we may need to request information from your records held by the Student Registration Office or the Examinations Office of the University.

I hereby authorise the above units of the University to forward my details held on their records to the International Office of the University of Passau.

☐ Yes

☐ No

.....
Place, date

.....
Applicant's signature

I understand that giving false or incomplete answers may result in my being prosecuted in the criminal courts and that I may be handed a fine in addition to having any amounts already transferred to my bank account reclaimed. Furthermore, I am aware that the scholarship is earmarked for a specific purpose and that I am obliged to repay the scholarship if I do not use it for the purpose named in the application. Finally, I hereby declare that I have never been awarded an Oskar-Karl-Forster scholarship, at any university I may have attended, for the purchase of books and other learning materials or to pay towards my doctoral thesis printing costs. I confirm that the information given above is correct and complete.

.....
Place, date

.....
Applicant's signature

Please enclose the following documents:

- ☐ The signed and completed application form.
- ☐ A transcript showing the marks/grades/results achieved to date (HISQIS printout).
- ☐ If you are a recipient of a BAföG student scholarship: a copy of your BAföG certificate.
If you do not receive BAföG: a copy of your or your parents' most recent income tax assessment and a brief statement as to why you do not receive BAföG.
- ☐ The approved books lists
or, if applying for a printing scholarship:
 - the contract with the publisher on the printing of your doctoral thesis
 - a written statement from your doctoral supervisor
 - an earnings statement/payslip
- ☐ A current enrolment certificate (you must have been enrolled for at least one full semester)

Approval of a books list by a lecturer

☐ The books or learning materials listed are necessary for successful study (see books list)

Based on the student's performance, his or her application for a Oskar-Karl-Forster scholarship is:

☐ approved☐ rejected

Place, date

Applicant's signature

[illegible]