

4) Additional contact information (voluntary)

Telephone number (with country/ area code): _____

Mobile: _____

E-mail address: _____

5) Details concerning program of study:

Enrollment status
See Column 2 of appendix

Degree sought:
See Column 3

Mode of study:
See Column 4

1st trimester of study

advanced trimester of study

6) Eligibility for admission:

Type of proof that you are eligible for admission: _____
See Column 3 of the appendix

Date awarded: _____
day/ month/ year

Issued: abroad _____
Country: abbreviated Country

in Germany _____
License plate abbreviation City/ district

7) Details concerning health insurance:

I am covered by medical insurance.

Please enclose recent written confirmation from your insurance provider!

8) Occupational training prior to study

a) Were you given professional/ vocational training?
 No Yes— year completed: _____ duration in months: _____

b) Have you taken part in any internships which might be relevant to your studies?
 No Yes – duration in weeks: _____

c) Do you have any professional experience?
 No Yes – duration in months: _____

d) Total duration of training, internships, and experience listed above: duration in months: _____

Please enclose certified copies of your *Vorprüfungen* and *Zwischenprüfungen*.

15) Examination claim

Have you lost the right to take examinations in Germany?

no yes

If so, in what program of study?

_____ Degree sought/ subject

16) Study abroad experience

(This is only required if you were enrolled at a university abroad.)

Please indicate the duration and location of your period(s) of study abroad:

1st study period abroad:

_____ Duration in months / Country abbreviation / Country

2nd study period abroad:

_____ Duration in months / Country abbreviation / Country

17) Declaration / Signature

I hereby ensure

that the information entered on this application is true and correct to the best of my knowledge. I am aware that untruthful entries may lead to the dismissal or cancellation of my enrollment (see §§ 48 and 49 of the *Verwaltungsverfahrensgesetz*). I agree to immediately inform the registrar's office (*Prüfungs- und Praktikantenamt*, building 101) of any changes that may occur.

Furthermore, I ensure

that I have neither failed nor been barred from the examinations in the program of study to which I am applying for enrollment.

I am aware

- that refusal to enter certain information, which is processed in accordance with the *Hochschuldatenverordnung*, may lead to the dismissal of my application.
- that my application for enrollment will be dismissed if proof of health insurance or exemption therefrom is not provided. (pursuant to the *Krankenkassenmeldeverordnung*)

The required documents have been enclosed.

Location, date

Applicant's signature

Appendix							
Column 1		Column 2		Column 3		Column 4	
Study Program		Status		Degree		Mode of Study	
BAU	Bauingenieurwesen	H	Haupt Hörer	MB	Master of Business Administration	1	Erststudium
BME	Bildungswissenschaft	4	Gast Hörer	MA	Master of Arts (univ.)	2	Zweitstudium
EIT	Elektrotechnik			ME	Master of Engineering (FH)	5	Promotionsstudium
ETTI	Elektrotechnik/FH			MS	Master of Science (univ.)	6	Kontakt- /Weiterbildungsstudium
INF	Informatik			BS	Bachelor of Science (univ.)	7	konsekutiver Master
LRT	Luft- u. Raumfahrttechnik			BE	Bachelor of Engineering (FH)	9	Modulstudium
MB	Maschinenbau/FH			BA	Bachelor of Arts (univ.)		
ME	Mathematical Engineering			PR	Promotion gem. § 10 ImmExmO		
SPO	Sportwissenschaften			BF	Bachelor of Arts (FH)		
SWI	Staats- u. Sozialwissenschaften						
ISS	International Security Studies			Z	Zertifikat		