der Bundeswehr Universität 🙀 München **Application for Enrollment** In the fall trimester In the winter trimester In the spring trimester **ISS** Program of study (see Column 1 of the appendix) enrollment number standard enrollment enrollment as a non-degree guest matriculant enrollment as a high school guest matriculant enrollment as a doctoral student EDV erledigt am: 1) Personal Data Surname: Maiden name: First Name: Bitte hier Namen und Vornamen eintragen Suffix: Exmatrikulationsgrund: Prenominal title: Postnominal title: Date of birth: Gender: female ☐ male \square Place of birth: Citizenship: German 2nd Citizenship: 2) Mailing Address (c/o): Exmatrikuliert am: Street or P.O. Box: Postal code, city: 3) Permanent Address (c/o): Street or P.O. Box: Postal code, city:

4) Add	itional conta	ct information	(voluntary)				
Teleph	one number (with country/ ar	ea code):				
Mobile:							
E-mail	address:						
5) Deta	ails concerni	ng program of	study:				
		Degree sought: See Column 3		Mode of study: See Column 4			
□ 1st trimester of study □ adv			advanced tri	mester of st	udy		
6) Eligi	ibility for adn	nission:					
Type of See Colum	f proof that yo mn 3 of the append	ou are eligible fo	or admission:		Date awarded:	day/ month/ year	
Issued:		abroad	Country: ab	breviated	Country		
		in German		te abbreviation	viation City/ district		
7) Deta	ails concerni	ng health insu	rance:				
	I am covered	by medical insu	ırance.				
	Please enc	lose recent writ	ten confirmation	from your ir	nsurance provider!		
8) Occ	upational tra	ining prior to	study				
a)	Were you g ⊠ No	iven profession Yes-	al/ vocational tra year co	ining? mpleted:	duratio	n in months:	
b)	Have you ta	iken part in any	internships which	h might be	relevant to your stud	dies?	
	⊠ No	☐ Yes –	duration	in weeks:			
c)	Do you have ☐ No	e any professio ⊠ Yes –	nal experience? duration	in months:			
d)	Total duration	on of training, in	nternships, and e	xperience li	sted above: duration	on in months:	

9) Dual enrollment (Please only fill out if dual enrollment is	s planned.)						
I wish to apply for permissio Universität der Bundeswehr	n to be enrolled at a second ur München:	niversity parallel to my enrol	lment at the				
☐ No ☐ Yes							
If so, how long have you be	en enrolled at the second unive	ersity?					
Enrolled since: day What is the name of the sec		applied for dual enrollment e enrolled?					
Enrollment status: See column 2 of the appendix	Degree sought: see column 3	Mode of study:					
in the following program(s)	of study:						
1st program:							
2nd program:							
admission) as well as the se	our enrollment certification (or, econd university's authorization or lectures in the framework of the contraction of the contr	for dual enrollment. (Author)					
If you have never been en	nrolled at a university before, with the heading <i>Declarat</i>		າ on the last page				
10) First university or coll	ege of applied sciences atter	nded in Germany					
What was the first German	university or college of applied	sciences at which you were	enrolled? When?				
Semester/Trimester/Year:	- —	nmer semester year: trimester					
Institution:	EH etc.) Name location		country				
type (University, FH, etc.) Name, location country 11) Study last semester / trimester (Please only fill out this section if you were enrolled in a program of study last semester / trimester.)							
What is the name of the inst	titution at which you were enrol	led last semester?					
Institution: type (University, FH, etc.) Name, location							
type (Oniversity, 1	in, etc.) Name, location						
Location of Institution:	Abroad						
Location of Institution:	Abroad Country abbreviation	Country					
Location of Institution:		,					

12) Previous periods of study in Germany							
How many semester have you spent studying in Germany?							
Number of semesters enrolled at a German University, FH, Art / Music Academy:							
Number of semesters enrolled at a film academy, Berufsakademie, etc.							
How many of these semesters were							
- Holiday semesters?							
- Internship semesters?							
- Clinical practice?							
How many semesters did you spend							
- at a Studienkolleg?							
- enrolled at an Institution in former East Germany prior to 30 September 1990?							
Period of interruption:							
If you are enrolling in the same program of study, please enter your period of interruption in semesters following your initial enrollment.							
Please enclose a certified copy of the confirmation that you were removed from the registry of the last university, etc. you attended!							
13) Last program of study completed in Germany or abroad Please only fill out this section if you were awarded a degree. Name and location of secondary school:							
Type, Grade and Date of secondary school degree:							
Have you already completed a university-level program of study? ☐ no ☐ yes							
If so, please enter the following information for the last program of study you completed:							
Date of final examinations: day month year Institution (name, location)							
Degree awarded: subject area: subject(s)							
Final grade/ GPA:							
Please enclose a copy of your diploma.							
14) Vorprüfungen and Zwischenprüfungen at German Institutions							
Have you passed a <i>Vorprüfung</i> or <i>Zwischenprüfung</i> at a German university in one or more of the subjects included in the program of study to which you are applying?							
If so, please enter the examinations below in chronological order:							
Date Subject subject code result							

Please enclose certified copies of your Vorprüfungen and Zwischenprüfungen.						
15) Examination claim						
Have you lost the right to take examinations in Germany?						
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 <i>Verwaltungsverfahrensgesetz</i>). I agree to immediately inform the registrar's office (<i>Prüfungs-und Praktikantenamt</i> , 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 <i>Hochschuldatenverordnung</i>, 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 <i>Krankenkassenmeldeverordnung</i>) 						
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	Н	Haupthörer	MB	Master of Business Administration Master of Arts	1	Erststudium	
ВМЕ	Bildungswissenschaft	4	Gasthörer	MA	(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			ВА	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			