Application hardship fund Studentenwerk Leipzig



Please note that your data will be collected, processed and used for the processing procedure in accordance with the strict requirements of social data protection under the Saxon Data Protection Act. You can find information about the Data Protection here: https://www.stwl.de/en/bafog-finances/financial-support/hardship-funds-students

· <u> </u>		-		
Family Name		Home Adress		
First Name		Date of birth		
Nationality		ID No / Passport No		
Residence Permit §		Residence Permit Expiry		
Street, House No.		Postal code, City		
Email		Telephone		
University		Subject of study		
Enrolment Number		Semester		
☐ Firstdegree(BA, M	A, State Examination, Diplom)	☐ Doctora	tes 🗆	Second degree
☐ Postgraduate Studie Complementary Stud		of leave Number a own child	and age of Iren	
l apply for a		Family st	atus	
	ant in the amount of €			
•	ots at Studentenwerk Leipzig? oproved, should these debts be syment amount?	·	the amount of: way and	No Yes No
	ee that the Studentenwerk Leipzig m the departments of Accounting, BAföG nd name, name)			
Bank				
IBAN DE BIC				
Place	Date	h	andwritten s	ignature
T 1 60 11 1 1 1				
To be filled in by the S	ocial Counseling			
Entscheidung Bewilligung von	□ Darlehen □ Zusc	chuss in Höhe von €		
Bemerkung:				
Datum:				
Unterschriften:				_



		since / from - t	toAmount in €
Support by parents, sp	pouse, partner)		
Work income			
BAföG			
Loan, Student Loan			
Social Benefits (Child-,	HousingAllowance, ALG II, etc.)		
Scholarship			
Others (Pension, Orph	an's Pension etc.)		
One-off revenues (Ha	ave you received other resource	es for support? (e.g. Stu	dentenwerk, STURA, SiS etc.?)
	Ressource:	Date	Amount in €
Yes, it was :			
Which costs do you v	vant to cover with the requested	d amount? (Multiple selec	ction possible)
Rent	Health Insurance	Food	Other:
Regular monthly livin	ng costs 🕬 .		
Rent		Costs of living (e.g. mobile phone contract,	
Health Insurance		food, internet, other	
Reasons:		insurances or contracts, medication)	

- Please describe the specific emergency situation, e.g. lack of food, loss of insurance coverage or housing/room, medical expenses, etc.
- What caused the emergency situation? How long will the emergency situation last?
- Do you have any depts within Studentenwerk Leipzig or elsewhere?
- Have you applied for BAföG? If no, why not?

Regularly monthly income:

- What is your future perspective on financing your studies? When do you expect income and in what amount?
- Can the financial hardship be reduced by family, relatives, spouse or partner?

riease attach the following documents to your application.
 □ Student Card or enrollment certificate □ ID card or passport □ Residence permit (international students) □ Bank statements of all bank accounts (past two months) □ Current account balance as of the date of application (if account statement is not yet available, please submit a screenshot with account balance and date) visible □ Other documents or evidence that are important for the justification of your application .
Please mention them:
Tiedde mendon dremi
To be filled in by the Social Counselling::
Information SOB
Date Signature Social Counselling