

APPLICATION SCHOLARSHIP FOR THE BEGINNING

Personal Information

Family name, first
name

Birthday

Address

Street, Street No

Phone No

Zip Code, place

email address

Information on parents

Name

Monthly net income

Occupation

Name

Monthly net income

Occupation

No of siblings

age

Information on family status

Marital status

No of children

Age of children

If married

Name

Occupation

Monthly net income

Bank account details

IBAN

Name of Bank

BIC

Application for type and height

Max 3 months and maximum of 750€

Max 6 months and a maximum of 300€ (combination BAföG)

Max 6 months and a maximum of 400€

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I agree to the access of my BAföG files and confirm the accuracy of my information

Place and date

Signature