

# Application for financial support



For questions on how to complete the application, please contact the office or the speaker for Diversity and Social Affairs.

Adresse	„StuRa Eck“ – Zentralcampus Hubertstraße 15 03044 Cottbus
Telefon	0355/69-2200
E-Mail	soziales@stura-cottbus.de
Öffnungszeiten	Mon., Tue. and Fri.: 09:00 - 12:15 and 13:00 - 15:00 (Cottbus) Wed.: no office hours Thurs.: 09:00 - 12:15 and 13:00 - 15:00 (Senftenberg)

## Explanations about the application:

Personal data	The address should be the current place of residence. Your e-mail address is needed in order to send you the result of the approval process. A phone number makes it easier for the StuRa office to get back to you if there are any questions.
Bank details	Please specify to which account the money should be transferred in case of approval. Please specify who the holder of the account is. Only natural persons (no organizations, associations, etc.) come into consideration.
Net income	Any income received must be stated, including any received in cash. Income includes e.g. salary, scholarship, parental support, child support, education support etc. The income information in relation to the calculation period must be complete. This means that every plus must be specified in the account. Please provide all the required documents: e.g. wage stubs, wage card, parental declaration, partially blackened bank statements, BAföG notice, housing allowance notice, ALG-II-notice (copies are sufficient).
Proofs of income	In order to verify the net income, we require the wage slips, redacted bank statements or comparable evidence from all accounts that are in your name. It is important that <b>copies</b> of the income statements for the last six full months are submitted.
Application deadline	The application has to be submitted to the StuRa within the period mentioned below. The application can only be sent <b>by mail</b> to the above e-mail address. Use for the mail, with all attachments in <b>pdf</b> format and naming, the following subject: <b>SofWiSe22/23</b>

**Deadline for submission: 31.03.2023**

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## Data-protection Information for data subjects during the collection of personal data

As a sub-body of public law, the StuRa of the BTU Cottbus-Senftenberg reserves the right to take over the privacy policy of the Brandenburg Technical University Cottbus-Senftenberg. These can be found on the page <https://www.b-tu.de/en/privacy-policy/data-protection-information> and refer to the Art. 12, 13 General Data Protection Regulation (DS-GVO).

I confirm that I have read all the additional information and understood them as well as I agree with the data-protection regulations.

\_\_\_\_\_  
City, Date Signature

according to the "Sozialordnung" of the student body of the Brandenburg University of Technology Cottbus - Senftenberg of 11<sup>th</sup> May, 2021

Inbox (to be completed by StuRa):

1. PERSONAL DATA	
Female/ male/ divers	
Last name, first name	
Matriculation number	
Street, street number	
Zip code, city	
Telephone	
E-Mail	
Nationality	
Study course	
Marital status (if married, please fill out point 8. and 9.)	
Number of children	
<b>Please attach the following documents, if applicable:</b> <ul style="list-style-type: none"><li>✓ Official identification document (<b>not</b> student ID)</li><li>✓ Marriage certificate</li><li>✓ Birth certificate of children</li><li>✓ Study progress certificate (<b>not</b> grade overview/ Certificate of enrollment)</li></ul>	

2. BANK DETAILS	
Account holder	
IBAN	
BIC	
Bank	

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<b>3. INFORMATION ABOUT ACCOMMODATION</b>	
<input type="checkbox"/> I live on my own (also accounts for shared flats if you pay rent).	
<input type="checkbox"/> I live together with my marriage partner (and children).	
<input type="checkbox"/> I live together with my parents.	
<input type="checkbox"/> I don't pay rent.	
<p style="text-align: center;"><i>If applicable, please attach the following <b>documents</b>:</i></p> <p>✓ <b>Rental contract</b> for the relevant period (not housing provider confirmation)</p>	

<b>4. INFORMATION ON HEALTH AND NURSING CARE INSURANCE</b>	
<p><b>Explanation:</b> <i>You are entitled to receive financial support for your health and nursing care insurance if</i></p> <ul style="list-style-type: none"><li><i>you are insured by a voluntary public health and nursing care insurance (freiwillige gesetzliche Kranken- und Pflegeversicherung; usually the case for <b>students over the age of 30</b>).</i></li><li><i>you are insured by a private health and nursing care insurance since you are/were not entitled to be insured by a public health insurance.</i></li></ul>	
<input type="checkbox"/> I am insured through my family and/or didn't have to pay for the health and nursing care insurance.	
<input type="checkbox"/> I am insured by a mandatory public health and nursing care insurance for students.	
<input type="checkbox"/> I am insured by a voluntary public health and nursing care insurance. Monthly fee in Euro: _____	
<input type="checkbox"/> I am insured by a private health and nursing care insurance. Monthly fee in Euro: : _____	
<p style="text-align: center;"><b>Please attach the following documents, if you are insured by a voluntary public or private health and nursing care insurance:</b></p> <p>✓ <i>Proof of membership and insurance fees</i></p>	

<b>5. INFORMATION ON SPECIAL LIFE SITUATIONS</b>	
<input type="checkbox"/> I am pregnant.	<p style="text-align: right;"><i>If yes, please attach a medical certificate.</i></p>
<input type="checkbox"/> I am a single parent.	
<input type="checkbox"/> I have a disability.	<p style="text-align: right;"><i>If yes, please attach a medical certificate.</i></p>
<input type="checkbox"/> Due to my health condition, I have a special diet.	<p style="text-align: right;"><i>If yes, please attach a medical certificate.</i></p>
<input type="checkbox"/> I pay for additional public and private insurances (e.g. liability insurance, household insurance, life insurance, disability insurance).	<p style="text-align: right;"><i>If yes, please attach a proof of your membership and monthly insurance fees.</i></p>

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6. INFORMATION ABOUT THE TOTAL INCOME ON ALL YOUR ACCOUNTS				See explanations on page 1!	
Months	Salary	Family support	Scholarship	State aid (e.g. BAföG, accommodation allowance)	Others (e.g. money gifts, voluntary work salary)
August 2022					
September 2022					
October 2022					
November 2022					
December 2022					
January 2023					

**Please attach proof of incomes for all incomes of the last 6 months.**

7. INFORMATION ON YOUR SAVING ASSETS	
Current total saving assets' value in Euro:	
Explanation: Saving assets are for example blocked accounts, saving accounts, online accounts (e.g., Paypal, Apple Pay, Google Pay), stocks, loan agreements, and digital assets (e.g., cryptocurrencies). <b>Please attach proof of all your saving assets.</b>	

8. INFORMATION ON MARRIAGE PARTNER		
Female/ male/ divers		
Last name, first name		
Street, street number		
Zip code, city		
My marriage partner is a student.	Matriculation number:	

**Please fill out the following table (point 9.) and attach the listed documents, if you live together with your marriage partner and/or you are sharing living costs.**

- ✓ Official identification document of your spouse (not student ID)
- ✓ Proof of all income (e.g. pay slips for the last 6 months, partially redacted bank statements)
- ✓ Certificate of study history of your spouse

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9. INFORMATION ABOUT THE TOTAL INCOME ON ALL YOUR PARTNERS ACCOUNTS					See explanations on page 1!
Months	Salary	Family support	Scholarship	State aid (e.g. BAföG, accommodation allowance)	Others (e.g. money gifts, voluntary work salary)
August 2022					
September 2022					
October 2022					
November 2022					
December 2022					
January 2023					

*Please attach proof of incomes for all incomes of the last 6 months.*

10. FINANCIAL SUPPORT FOR LEARNING MATERIALS AND PRIVATE TUITION	
<input type="checkbox"/> During the last semester ( <b>SoSe 22</b> ) I bought the following learning material(s): _____ Total value in Euro: _____	
<input type="checkbox"/> During the last semester ( <b>SoSe 22</b> ) I took the following private tuition: _____ price per 45 min of tuition in Euro: _____ total value in Euro: _____	
<p><b>Explanation:</b> Please attach invoices proving the purchase of the above learning supports. Only purchases made during the last semester and supports that are essential for successful completion of the program can be considered. Please make sure that the invoices can be attributed to the corresponding purchases (and the purchaser)</p>	

CORRECTNESS	
<input type="checkbox"/> I confirm the correctness and completeness of my information. All required documents are attached. I agree that the Sozialfondskommission can check and verify the information submitted, especially through the BAföG – Amt and the scholarship coordination office of the university. I agree with the processing of my personal data for the purpose of this application. In particular, I agree with a data comparison between the Student Council of the BTU and the BTU Cottbus-Senftenberg, as well as the BAföG – Amt.	

SIGNATURE	
City, date	Signature