

Application for Social Aid

supported by AStA of UdK Berlin

AStA der UdK Berlin
 Hardenbergstr. 33
 Raum 9
 10623 Berlin



I hereby apply for social aid according to the Social Funding Statues of AStA of UdK Berlin.

Semester of application: Enrolment number:

Winter

Summer

Please arrange an appointment with:
soziales@asta-udk-berlin.de

Name		Given name	
<input type="text"/>		<input type="text"/>	
Street, No.			c/o
<input type="text"/>			<input type="text"/>
ZIP/Postal Code	City	Country	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Phone	E-Mail		
<input type="text"/>	<input type="text"/>		
Study programme/Semester		Date of Birth	
<input type="text"/>		<input type="text"/>	
Citizenship		Marital status	
<input type="text"/>		<input type="text"/>	

IBAN							
<input type="text"/>	<input type="text"/>	<input type="text"/>					
BIC			Name of Bank		Account holder (Name, given name, if it's not your account)		
<input type="text"/>			<input type="text"/>		<input type="text"/>		

Haush-L 1: Bitte zahlen Sie aus Kap. 25 Titel 68178 an oben genannte Person (Vom AStA auszufüllen)		
AStA-Protokoll von	Abstimmungsergebnis	Fördersumme
Eingang im AStA	Für die sachliche Richtigkeit, Sozialreferat, Datum, Unterschrift, Name in Druckbuchstaben	Für die rechn. Richtigkeit, Finanzreferat, Datum, Unterschrift, Name in Druckbuchstaben

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I got into a financial emergency situation through no fault of my own and have no more money to pay my rent and health insurance. I have exhausted all alternative sources of revenue without success.

- I have an injury or illness, which is why I cannot work
- My passport holds an entry regarding a restricted work permit. I am not an EU citizen.
- I have at least one child living with me or I have at least one child I am obligated to pay alimony for.
- I am a single parent living alone with my child/children providing for them.
- I have not been able to pay my rent and/or health insurance in the last month.
- I am pregnant and at least in the 12th week of pregnancy.
- I was robbed or had a misfortune (eg apartment fire) and I am not (sufficiently) insured.

I claim the following comparable hardships:

Please use an extra sheet of paper if necessary

I am obligated to pay alimony for the following people or I am paying alimony and/or I have a child/children.

Number

Child/children

Spouse

Other person(s)

I pay rent and my share of it is:

pro Monat

Rent/Month: €

Electricity: €

Gas: €

Total €

I have moved during the past three months or my rent has changed since the month of:

Month

Rent: €

Electricity: €

Gas: €

Total €

I live in a shared flat or split the rent with a spouse, friend or parents.

I do not pay rent.

I have paid a security deposit during the past three months.

 €

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<input type="checkbox"/> I have health insurance. The monthly fees are:	<input type="text"/>	€
<input type="checkbox"/> I do not pay health insurance. I have family health co-insurance.		

<input type="checkbox"/> I applied for a scholarship or I am a scholarship holder.	<input type="text"/>
<input type="checkbox"/> I applied for BAföG (German Federal Law on Support in Education).	
<input type="checkbox"/> I applied for housing benefits.	

What amount of money do you currently have per month? Where does it come from?
<input type="text"/>

My financial situation will improve in the next weeks because...

Please attach the following supporting documents to this application form:

1. Copy of your student ID
2. Copy of your passport/visa
3. Copy of your rental contract
4. Statement of your bank account (past 3 months)
5. (Proof of income)

I confirm that I do not own wealth and/or assets, that I have done everything I can to free myself from financial hardship, and I confirm that I have given the information in this form and the attached documents to the best of my knowledge and conscience.

Date

Signature
