

Please note that ONLY the German version of this document is legally binding. The English translation is provided for informational purposes and to help you fill out the original German form. You must fill out and sign the German form.



Katholische Universität Eichstätt-Ingolstadt  
Studierendenbüro  
Ostenstr. 26  
85072 Eichstätt, Germany

### Notification of pregnancy

|                 |  |
|-----------------|--|
| Name:           |  |
| First name:     |  |
| Address:        |  |
| Phone:          |  |
| E-mail:         |  |
| Date of birth:  |  |
| Degree program: |  |
| Faculty:        |  |
| Semester:       |  |

The estimated due date is \_\_\_\_\_ (date).

Proof of the pregnancy has been provided by:

- ☐ Medical certificate
- ☐ Copy of the *Mutterpass* (maternity record booklet)

---

Place, date

Signature