

KU scholarship for international students

APPLICATION FORM

Note: Both professional and personal qualifications are decisive for the scholarship. Consideration is given to previous studies and examinations as well as to special academic knowledge.

Please fill out electronically	
Application for funding in the (please select):	
<input type="checkbox"/> First application	<input type="checkbox"/> Application for renewal

1. Personal data

Last name:	
First name:	
Matriculation number at the KU:	
The course of study:	
Average grade ¹ :	
Semester:	
Street and house number:	
Zip code, city:	
E-mail:	
Telephone:	
Sex:	<input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> unspecified
Date of birth:	
Place of birth:	
Nationality:	
Voluntary commitment - if any:	

¹ If you are a master's student in your first semester upon applying, please indicate the grade of your bachelor's degree and the corresponding grade in Germany (see also [German grading system](#)).

2. Received funding so far

Have you already applied for funding for your studies at another private or public organization (for example DAAD, another university, etc.) in Bavaria?

yes no

If yes:

Where (exact address):

When:

Has the decision already been taken? yes no

If yes, please enclose a decision.

If no: please insert the application, if available.

4. Income information

Do you receive BAföG? yes no

If yes, please attach your latest BAföG receipt

Do you have a monthly income (e.g. from employment, capital income, other scholarship, student assistant, etc.)?

yes, I have my own monthly income/ scholarship of _____ EUR. If scholarship, please specify: _____

no, I do not have my own monthly income.

If no: How much maintenance (including child allowance) do you receive from your parents or spouse?

_____ EUR

Please note that you may be required to provide official proof for the above information (e.g. proof of the income tax declaration). Incorrect statements by the applicant, in particular about financial need, may lead to a permanent refusal of the scholarship or to the withdrawal of the granted funding approval and recovery of the benefits already paid as well as to criminal charges.

I am aware that I am obliged to notify the International Office in writing without delay of any change in my economic situation or family circumstances, and that false statements lead to the withdrawal of the decision and, if applicable, to criminal charges.

.....

Place, date

.....

Signature

Privacy Policy

**You are free to inform us of your personal information requested above.
Without this data, however, your request can not be processed!**

Declaration of consent:

Your personal data will be processed electronically **for the processing of your scholarship only**. Your data will only be forwarded to the members of the International Office of the Catholic University of Eichstätt-Ingolstadt who are involved in the selection process, as well as to the staff of the Catholic University of Eichstätt-Ingolstadt who are involved in administrative processing; an additional transfer of your data to third parties only takes place subject to your prior explicit consent.

I agree to the above processing of my data.

.....

Place, date

.....

Signature

In order to facilitate administrative processes, information regarding personal data may need to be obtained from the KU Student Office and the KU Examinations Office.

I agree that my data will be collected and forwarded to the International Office.

yes no

.....

Place, date

.....

Signature

Statement
regarding the application for a scholarship
to promote internationalization
funded by the Bavarian Ministry
of Education and Culture, Science, and Art.

I _____ (first name, last name) hereby assure the correctness and completeness of the information provided above. I am aware that giving false information can lead to a permanent refusal of the scholarship or to its revocation and recovery of amounts already paid. Incorrect statements by the applicant, in particular about financial need, may lead to a permanent refusal of the scholarship or to the withdrawal of the granted approval and the recovery of the benefits already paid as well as to criminal charges.

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Place, date

.....

Signature

Please note that only fully completed applications submitted in due time can be considered.