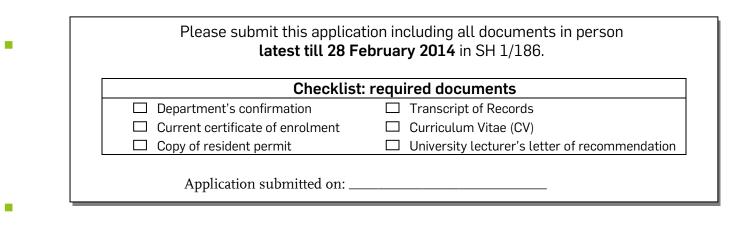




# Graduation grants for foreign students

-Application-

I am an international student (more exactly: a student who received his/her entry qualification in a country other than Germany) and am enrolled at the Ruhr-Universität Bochum. I aim for a Bachelor, Master or state exam and am in my last semester.



## 1. Personal data

Family name	Telephone number		
First name	Email address		
Date and place of birth	Address (Street, number, postcode, place)		
Citizenship			
Matriculation number	_		
□ single □ married	Citizenship/occupation of marriage partner		
Number and age of children	Parents' occupations Country of residence		
Number of siblings Country of residence			





#### 2. Data concerning your studies

Subject/s of study

Previous average grade

Date of your final exam or deadline

### 3. Financial Situation

Scholarships can only be given to indigent students. Therefore, please describe your financial situation:

a) How much money will presumably be at your disposal per month over the course of your studies?

b) How do you finance your studies?

Own funds/savings

Bank loan

Support from parents or other relatives

Part time job

Scholarship from

(please indicate the respective scholarship institution and its rate) Other:

c) Do you have any depts? Yes □ No □
Kind of depts

Amount





d)	Did you apply for and	ther scholarship at th	ne same time?	Yes 🗆 No 🗆
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(please indicate the respective scholarship institution and further details)

## 4. Motivation concerning your application for this grant

Please prove your special need for a scholarship by characterizing your financial situation and social background:

I hereby confirm that the statements above are correct to the best of my knowledge and belief and that I undertake to communicate any changes of my financial situation immediately to the International Office. I am aware that if I should render any incorrect information this will result in exclusion from the scholarship program. Further I will then be obliged to return all of the received benefits.

Date, Signature of Applicant