

## Application for Emergency Grant for International Students at LUH

- Please use the following upload link to submit your application documents in PDF format. All files should be named with your Surname (f.e. "Max Mustermann\_Application.pdf"): <https://seafire.projekt.uni-hannover.de/u/d/b8c662f93ded4f4f92c3/>
- Only complete applications will be processed. There is no legal entitlement to emergency grant. Please note our privacy policy and award policy. Contact for questions: [HI-Beihilfe@zuv.uni-hannover.de](mailto:HI-Beihilfe@zuv.uni-hannover.de)

### Applicant

Surname		First name	
Date of birth		Nationality	
Marital status		Number of children	
Postal address			
Phone			
Email			
Matriculation number			
Degree programme			

### Account Details

Please indicate the account to which the emergency grant should be transferred.

Name of Bank	
IBAN	
BIC	
Steuer-ID	
Zuständiges Finanzamt	

### Financial Situation

Please enter your average monthly income and expenses in euros. Married persons please also submit proof of income of the spouse.

Monthly income	€	Monthly expenses	€
Own income		Rent and utilities	
Income of spouse		Health insurance	
Family support		Mobile phone, internet	
Blocked Account withdrawal		Groceries, leisure and sport	
Scholarship		Loan repayment	
Loan		Other	
Other			
<b>TOTAL</b>		<b>TOTAL</b>	

Please describe your financial emergency in detail. How are you taking action to improve your financial situation?

Please submit the following documents as a scan or copy:

- Passport and residence permit (EAT)
- Certificate of Enrolment
- Transcript of Marks issued by the Examination Office
- Bank statements of all accounts of the last 3 months (incl. Paypal, credit card, etc.)
- Statement of your blocked account or copy of declaration of commitment
- Proof of income or employment contract
- Rental agreement
- Certification of scholarship
- Any documents explaining your situation

Insofar as any information I provide indicates my racial or ethnic origin, political opinion, religious or philosophical beliefs or trade union membership, health or sex life or sexual orientation, or genetic or biometric data (pursuant to Art. 9 DSGVO) is processed, I consent to the processing of this data with my signature. This consent is voluntary. I can refuse it without giving reasons. However, it will then not be possible to process the application. I can also revoke this consent at any time (e.g. by letter or e-mail). The revocation of consent does not affect the lawfulness of the processing carried out on the basis of the consent until the revocation.

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Place, Date

Signature