Application for Admission to the Christophorus-Haus in Hamburg



Photo

(Please name)

Desired date for moving in:		
planned to stay until (eg. Internship)		
Only students who are enrolled at a Univinstitutions(eg. Studienkolleg) are entitled. The application does not establish an en	d to stay/reside at the Christophorus-Haus	
Have you previously lived in a student re	sidence in Hamburg?	
	from to	
	from to	
Have you in the past lodged an application Yes ☐ When?	•	
DYfgcbU ['] 8 YfU] g		
Family Name:	First Name:	
Date of Birth:	Place of Birth:	
Nationality:	Gender: M □ F □	
Marital Status:		
Residential Address:		
Postal Address where the notification she	ould be sent to:	
	Mobile:	
E-Mail:		
Number of siblings still living with parents:		
⊫bZcfa Uhjcb UVcihmcif GhiX]Yg		
Type of baccalaureate(Hochschulreife):		
Any Occupation before your Studies:		
Field of Study:		
Anticipated Qualification: ☐ Studienkolle	g 🖵 Bachelor 🖵 Master 🖵 Diplom/Magister Other	
Semester: First Semester ☐ or Se		
Which Hamburg Hochschule(College/University) are you currently enrolled at:		
_		

(Confirmation of enrollment at a Hamburg College/University must be provided before moving in)

:]bUbWTU ∃bZcfa Uhlcb How do you intend to support yourself financially during your studies? (Please include actual or anticipated contributions in Euro.) yes □ · · · no □ · · · no □ · I have a BAföG subsidy I have applied for a BAföG subsidy per month _____ € BAföG subsidised amount Financial support from Parents/Partner/Relatives) no 🗖 per month € including rent: ves 🖵 Pension payments and per month _____ € and similar benefits Scholarship/ Name of scholarship provider _____ per month ____ € Self earned income per month total per month : _____ € Available joint monthly income Tuition Fees (per semester): =a dcfhUbhi=bZcfa Uhicb Applicants will be favoured, who can prove their social indigence (eg. BAföG-Notification, Scholarship Certificate, Pension Certificate, Case Maintenance). All other applicants must show proof of their Income-Status if required from the bearer. Applicants that can prove in writing their medical dissability through doctors statements or medical certificates, will be preferably affiliated. The application will only be processed when it is fully and correctly filled out. A Curriculum Vitae and photogragh are required. Please send your application form and documentation with an attatched prepaid returned envelope to: Christophorus-Haus e.V., Kalckreuthweg 74-80, 22607 Hamburg. **Explanation** I assure to have answered all questions completely and correctly. I am well aware that my application will not be processed if quetions and documentation are incomplete. Attatched documentation: Photo

• Curriculum Vitae

Place

Prepaid addressed return envelope

Date

Signature