

An die
ÖH-Mozarteum
Mirabellplatz 1
5020 Salzburg
Tel.: +43 676 88122559



APPLICATION FOR SPECIAL FUND 'STUDY FEES'

ATTENTION: Please enclose all supporting documents!
Please send the completed and signed application with all documents (scans, pdfs) exclusively by e-mail to **vorsitz@oeh-mozarteum.at**, all documents in one e-mail!
Only complete applications will be processed!

.....
Surname

Name

.....
Tel.-Nr.

E-Mail

.....
Address

.....
Nationality

Place of Birth

Date of Birth

.....
University
Number

Field of studies

Matriculation

.....
Approved in the current study since

number of semesters

Have you ever changed your field of studies? no yes

Former field of studies:, Date of

Change:.....

Number of positive examinations taken in the last two

semesters:.....

Have you exceeded the minimum duration of your current degree program? Why?

.....

Grant

Referring you study aid? no yes: how much?€ per month

if not, why not?

Did you ever study-based aid?

yes, when and why not now? no

.....

Family status:

single married divorced cohabitating separated widowed

Amount of monthly income of your household (including your partner):

through employment: € Unemployment/ other govermental aid: €

Pension: € Childcare/ maternity allowance: €

Housing assistance: € Family allowance (for your child/red): €.....

Family allowance for you: € Social welfare: €

Alimony: € Other non-monetary support: €

Support from your parents/ relatives/ friends: €

Support from federal states, municiplality or other official institutions: €

Other (e.g. occasional jobs, donations, etc.): €

Totally monthly income: €.....

Amount of monthly spending your budget in euros (receipts required – except for food costs):

Rent (incl. OC): €..... Energy/ Heating: €.....

household insurance: € Radio ans television license fee: €

health insurance: € study-related costs: €

Cost of: € travel expenses: €

Childcare costs: €..... other: €.....

Total of all expenses per month: €.....

Do you have children? no yes:

Name and date of birth

.....

Number and ages of siblings

.....

How many brothers and sisters are in training?

.....

Information about childcare facility

.....

Name and address of the institutions/ person (Chèche, kindergarten, babysitter, childminder/ father, Hort, etc.)

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Monthly cost of childcare

.....

Date of commencement of service

(incl. Heating u. Work contribution, but without food cost)

Information about your partner:

.....

Name of your partner:

.....

profession:

monthly income:

.....

Address:

Information about your parents:

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Your mother's name:

.....
profession:

.....
monthly income:

.....
Your father's name:

.....
Profession:

.....
monthly income:

Justification of the request (representation of an emergency):

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Do you have any of the Students' Union or by other bodies (e.g. Caritas, AAI, OAD, WUS, BM:BWK etc.) Get in the last twelve months have support?

no yes: from whom, how much and when?

.....

Your bank details:

.....
Bank

IBAN

BIC

**I confirm with my signature the accuracy of the information.
In particular, I confirm that I do not receive any income not specified.**

.....
Date

Signature

Required documents (copies only):

If the information and documents are incomplete - especially regarding the financial situation - the application will be rejected due to time constraints.

X Registration form from you, your partner, your child/children

X Confirmation of enrolment

X collective certificate, diploma certificate(s)

X consecutive bank statements from your account(s) for the last three months prior to application

X Confirmation of payment of the last three months' rent

X Receipts for all income (contracts / payslips / etc.)

X Proof of inflation (energy costs, rental costs, additional payments, etc.)

X Proof of income from you, your parents or your partner

X for third-country nationals: Proof of a valid residence permit for Austria at the time of application

X current confirmation of diploma thesis or dissertation

O Birth certificate of your child or children

O Alimony agreement, confirmation of advance maintenance payments, confirmation of payment of alimony

O Further proof of your emergency situation (e.g.: medical confirmations, theft report, proof of therapy and/or treatment costs

proof of treatment costs, confirmation of rent arrears, etc.)

Data protection regulations

(according to the guidelines for awarding scholarships within the framework of the special fund 'Studienbeiträge', §8)

- (1) All personal data and documents will be treated with the utmost care and confidentiality.
- (2) Within the ÖH Mozarteum, only members of the award committee have access to the application documents.
- (3) Under no circumstances will personal data and documents be passed on to third parties.
- (4) The personal data and documents will be used exclusively for the processing of the scholarship and the calculation of the respective amount.
- (5) All application documents will be stored for a period of 7 years in accordance with § 41 (6) HSG 2014 inaccessible to unauthorised persons.

Declaration of consent

- (1) I confirm by my signature that the information provided is correct.
 - (2) In particular, I confirm that I do not receive any undisclosed income.
 - (3) I will provide the ÖH Mozarteum with complete bank statements and proof of my parents' income on request, provided that these are requested within 4 months of the positive scholarship decision.
 - (4) I undertake to inform the ÖH Mozarteum immediately of any unexpected significant change in my financial situation within the first 4 months after the positive scholarship decision.
 - (5) I undertake to repay the scholarship in full or in part if I have received it on the basis of false information. I also undertake to repay the scholarship in full or in part on request if my financial situation should improve considerably within 4 months of receiving a positive decision.
 - (6) I take note of the above data protection provisions and declare that I agree with them.
 - (7) I am sending this application together with all documents by e-mail to vorsitz@oeh-mozarteum.at. I am aware that my application will not be processed if it is sent by other means and/or the documents are not complete.
- I am aware that there is no legal entitlement to a scholarship and that the awarding of a scholarship is at the discretion of the ÖH Mozarteum award committee.

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Date: _____ Signature: _____