

Application for emergency aid · Social hardship 2020



Name:	Firstname:
Gender	
<input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> divers	
Date of birth	Nationality
University	Registration-number
Address	
..... <i>Street, house number</i>	
..... <i>Postcode/City</i>	
Phone Number	E-Mail:
Banking Details	
Account Holder:	IBAN:
BIC:	Credit Institution:

Description of the urgency of my situation : <i>(unpredictable, temporary, through no fault of your own, attempt(s) to help yourself)</i>

Description of my further study programme/ plan:

Expenditure of the previous 3 months	Month:	Month:	Month:
Rent	€	€	€
Additional rental costs (optional)	€	€	€
Health insurance costs	€	€	€
Data network- & Telephone charges	€	€	€
Transport (if applicable, by pro rata with the semester ticket)	€	€	€
indispensible study costs	€	€	€
Total:	€	€	€

Revenue of the previous 3 months	Month:	Month:	Month:
Financial support (Parents/Family)	€	€	€
BAföG	€	€	€
Scholarship	€	€	€
Job	€	€	€
<i>Others (e.g Housing benefit, Child benefit etc.) – Please name!</i>			
·	€	€	€
·	€	€	€
·	€	€	€
Total:	€	€	€

I have submitted the following applications for support or will apply for them shortly:		
<input type="checkbox"/> BAföG	<input type="checkbox"/> ALG II/JobCenter-services	<input type="checkbox"/> Housing Benefit
<input type="checkbox"/> Credits/ Loans	<input type="checkbox"/> Deferral of rent in the dorm <input type="checkbox"/> Deferral of costs for state hold or private health insurance <input type="checkbox"/> Refund of semester ticket fee <input type="checkbox"/> Others:	

I declare that I have checked all other options known to me and have no savings that I can use to remedy my emergency.

I accept the allocation guidelines.

I am aware that incorrect and incomplete information lead to reimbursement claims by the Studierendenwerk Rostock-Wismar.

The documents/evidence denominated on the following page are attached to the application!

.....
Place/Date

.....
Signature

Submitted documents/Proof

- Current certificate of enrollment
- Employment contract /notice of resignation
- Tenancy agreement
- Health insurance costs*
- Notices of maintenance*
- Parents´ payment*
- Payments by the sponsor/grant*
- Payments according to BAföG*
- Donations in kind/Vouchers*
- Other incoming payments
- bank statements of all accounts in the previous 3 months
For spouses/Life partners who do not live separately also to prove their income!
- Declaration of consent according to DS-GVO (data privacy)

Processing note:
(is filled in by the Studierendenwerk.)

<input type="checkbox"/>
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Checked:

.....
Date/Signature

**) Proof of account statement possible (see markings/comments there!)*

Declaration of consent to the processing of personal data according to article 6 Abs. 1a of the DS-GVO by the Studierendenwerk Rostock-Wismar.

.....
Name, Firstname

.....
Date of birth

I, hereby, authorize the social counselling employee of the Studierendenwerk Rostock-Wismar to forward personal data, if it is necessary to grant the requested support, to employees, the division management and the head of the department of the social counselling department of the Studierendenwerk Rostock-Wismar.

With the retention, processing and use of my provided personal data and information by the social counselling service of the Rostock-Wismar Studierendenwerk, I agree, insofar, as this is necessary, to decide on my application and to correspond with me.

The personal data collected with this application will be saved within the statutory retention period and will be deleted as soon as this will have expired.

According to article 7 of the DS-GVO, I have the right to withdraw this consent at any time towards the social counselling service of the Studierendenwerk Rostock-Wismar. After incoming mail of the cancellation, the social counselling of the Studierendenwerk Rostock-Wismar will refrain from data processing based on this consent.

According to Art. 15 of the DS-GVO, I have the right to request information about processing my personal data at the social counselling of the Studierendenwerk Rostock-Wismar.

According to article 16 of the DS-GVO, I have the right to immediately demand correction of incorrect information or the completion of my at the social counselling of the Studierendenwerk Rostock-Wismar saved data.

According to article 17 of the DS-GVO, I have the right to request the deletion of my data held by the social counselling of the Studierendenwerk Rostock-Wismar, unless their processing is necessary for the fulfilment of a legal obligation or alleging, exercising or defending of legal claims.

I have been informed about handing in additional documents to be submitted personally, by post or by e-mail (at your own risk)

.....
Place/Date

.....
Signature