

Application for special assistance for financial hardship provided by the Constituted Student Body at KIT

Claim of bias

Is there a cause for suspected bias according to §4 of the Notlagenzuschussvergabeordnung?

(Relatedness, relationships by marriage, both up to third degree, as well as civil partnerships and acquaintanceship of the applicant with members of the awarding commission)

(Please tick.)

- ☐ No
- ☐ Yes, in case of

Members of the awarding commission:

- ☐ Jonas Baumann (Angewandte Geowissenschaften)
- ☐ Anna Zanke (WMK)
- ☐ Ayda Celik (Architektur)
- ☐ Thea Fleig (Maschinenbau)
- ☐ Moritz Pfafferott (Mathematik)

Alternates:

Standby Members

- ☐ Robin Oehler (Wirtschaftsingenieurwesen)
- ☐ Laura Weiser (Geoökologie)
- ☐ Sören Finna (Physik)
- ☐ Paul Link (Informatik)

AStA Department of Social Affairs

- ☐ Sascha Gruber
- ☐ VACANT

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Applicant

Surname, First Name

Street Name and House Number

Postal Code and Place of Residence

Date of Birth, Place of Birth

E-Mail (important for further questions!)

Mobile Phone (optional)

Field of Study

Are you a member of the constituted student body at Karlsruhe Institute of Technology?
(Are you an enrolled student at KIT?)

☐ Yes

☐ No

Have you received a special assistance grant for financial hardship (provided by the
Student Body) within the last 18 months?

☐ Yes

☐ No

Is this a request for an extension?

☐ Yes

☐ No

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Confirmation

I have taken note of and understood the regulations regarding the special assistance grant for financial hardship as published on the 16.04.2026

(asta-kit.de/de/studierendenschaft/satzungen/notlagenzuschussvergabeordnung).

I confirm that the data given in my application is true, complete and accurate and that in the short-term I am unable to fall back on any savings, people obliged to pay for my subsistence or any other sources of income. I obtain no financial support from other parties except those I indicated.

I authorize the constituted student body to pass on my application data to other supporting bodies, especially to the Studierendenwerk Karlsruhe, the evangelische Studierendengemeinde Karlsruhe und the katholische Hochschulgemeinde Karlsruhe, in order to check and exclude any possible double support. I am aware that I can revoke this consent at any time.

Should the financial support be granted, I will commit myself to inform the grants commission per e-mail to Notlagenhilfe@asta-kit.de promptly of any changes in my circumstances which affect the granting of my financial support. In case I should be granted financial support, I pledge to use the grant for the specified purposes only.

I acknowledge the fact that the granting of the financial support will be immediately withdrawn, if I have not complied with my duty to supply information about any changes in my circumstances, about further financial support unknown to the constituted student body, or if the constituted student body upon verification should discover that the preconditions for the scholarship no longer persist.

A retroactive cancellation of the grant is possible, particularly in the event of double support, furthermore in cases where grants have been approved based on false statements by the applicant. In such cases, the constituted student body reserves the right to reclaim the money already paid.

Should the academic program be interrupted or discontinued, the approval will be revoked at the end of the month in which the student interrupted or discontinued his course of studies. The approval will also be revoked in cases where the financial support has been used as a basic financing of studies.

If I do not respond to queries in response to my application for more than a month, my application will be rejected.

Place, Date and Signature of Applicant

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Financial Situation

Table of expected income and expenses for the following two months

(Please fill in this table and include evidence.)

Month 1: . . – . . 			
Income		Expenses	
Parents/family	€ 	Rent	€
Part-time job	€ 	Food	€
BAföG	€ 	Transportation	€
Student loan	€ 	Health insurance	€
Scholarships	€ 	Leisure	€
Social fund	€ 	Clothing	€
Other:		Mobile phone/Internet	€
 	€ 	Learning material	€
 	€ 	Other: (semester fees, prescription drugs,...)	
 	€ 	 	€
 	€ 	 	€
Total	€ 	Total	€

Month 2: . . – . . 			
Income		Expenses	
Parents/family	€ 	Rent	€
Part-time job	€ 	Food	€
BAföG	€ 	Transportation	€
Student loan	€ 	Health insurance	€
Scholarships	€ 	Leisure	€
Social fund	€ 	Clothing	€
Other:		Mobile phone/Internet	€
 	€ 	Learning material	€
 	€ 	Other: (semester fees, prescription drugs,...)	
 	€ 	 	€
 	€ 	 	€
Total	€ 	Total	€

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Requested total funding: €

(Following from the tables. To be justified in the description of your case.)

Table of preexisting debt

(Please fill in this table and include evidence.)

Creditor (health insurance provider, friends,...)	Amount	Due date	Consequences of non-payment ("What happens if you don't pay back in time?")
	€		
	€		
	€		
	€		
Total	€		

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Other Possibilities for Assistance

With the following questions we check for your eligibility for financial assistance from other institutions. In case we do refer you to another institution, this application is on hold. Should you be rejected by the other institution, this application will be resumed.

Are you in the last year of studies of your currently pursued degree?

☐ Yes

☐ No

Have you already registered your thesis?

☐ Yes

☐ No

Questions for **international** students:

Is your grade average 2.5 or better?

☐ Yes

☐ No

Questions for **German** students:

Have you ever applied for BAföG?

☐ Yes

☐ Approved

Amount:

Covered Period:

☐ Rejected

Reason:

☐ No

Reason:

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Checklist Enclosures (all required)

☐ **Bank Statements:**

Provide copies of all your bank and credit card statements (especially showing fees for accommodation, subsistence allowances and other income/earnings) from the three months (90 days) prior to the application date. Expenses may be partially blacked out; incomes may not. In the case of a request for an extension, supporting documents added since the initial application are sufficient.

This includes:

- Bank statements
- Credit card statements
- PayPal accounts
- Savings books
- housing-savings
- All other funds, stocks of wealth and assets on accounts.

☐ **Description of Your Case:**

Minimum one page. If an extension is requested, the circumstances that led to the need for an extension, which are beyond the applicant's control, must be explained, and a plan for the further financing of the studies must be provided.

The description of your case should answer the following questions:

- How have you gotten into your current situation of financial hardship? In what way has it arrived unexpectedly?
- What is the impact of your financial hardship on your studies?
- What are your long-term plans to get out of your financial hardship (preferably up to reaching your degree)?
- From which other sources have you received funds so far (relief funds, friends, family...?) and which other opportunities are there for you to get financial assistance?

☐ **Current Certificate of Enrollment**

☐ **Application Form completely filled in and signed (!)**

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Submitting the application

Please submit all documents as a PDF file per e-mail to notlagenhilfe@asta-kit.de

In case of questions

Just write an e-mail to: Notlagenhilfe@asta-kit.de

The AStA department of social affairs also provides advice for completing your application during its office hours. If you wish, the head of the AStA department can accompany you during the granting session. The AStA department of social affairs is not directly involved in the decision of granting an application.

Office hours of the AStA department of social affairs:

<https://www.asta-kit.de/de/angebote/beratung/sozialberatung>

Note: Payment arrangements will be discussed during the sitting.