

Other (e.g.: kindergarden):

Debts:



Request for granting a free table

Free tables are voluntary services provided by the Studierenden-Service-Verein e.V. (SSV). Therefore, there is no legal claim. The completed application must be submitted by the 20th of the previous month at the latest. Supporting documents, in particular complete bank statements for the last three months and a certificate of enrollment must be submitted in the AStA social counseling hours in person. The application period begins on the 1st of the following month. The cards for approved free tables are to be collected from the counter during opening hours in the respective month of allocation. The personally assigned free table card must be returned to the counter by the 20th of the month following the last month of release. Otherwise the deposit will be forfeited. **Personal Data:** Name. first Name Adress Nationality E-Mail Study: University/college Semester ☐ Bachelor ☐ Master Course of study Work: □ ves \square ves \square no ☐ no Are vou in the application process? Do vou have a iob? Social: ☐ no Social involvement? □ ves Children (number) ☐ ves ☐ no □ ves □ no Do vou live alone? I have a disability ☐ no Do vou live in a dormitory? □ ves ☐ no Are vou eligible for BaföG? □ ves Financing of studies: per month Support from family: € € BAföG, scholarship: Income from own work: € Other: € Assets (bank account, shares, foreign accounts, ...) € Burdens: per month Rent € € Utilities (electricity, gas, water, Internet, ...): Health insurance contribution: €

> € €

Describe your current financial situation in ca. 2-3 sentences:	
How to do you plan to improve your financial situation (write 2-3 sentence	res):
Tiow to do you plan to improve your infancial situation (write 2 3 sentence	
I assure that I have provided all information completely and correctly and undertake to	
Department becomes aware of any contradictory information. Furthermore, I agree that personalized form. I hereby confirm that I have read the general terms and conditions (above	
Date, Signature:	
Date, Signature	
Not to be filled in by the ap	
	received by :
☐ Bank statements ☐ Certificate of enrollment	
☐ Information on social volunteering	Date, Signature