

Family Name, First Name
Street
Postcode, City
Matriculation Number
Telephone (optional)
E-mail (optional)
<input type="checkbox"/> I do not have access to a bank account

Bank
Bank Address (for non EU)
BIC OR international SWIFT Code ((for non EU)
IBAN
Account Number (for non EU)
Account holder, if not own account

An den Härtefallausschuss  
der Studierendenschaft der  
Universität zu Köln

Universitätsstr. 16  
50937 Köln

<i>(internal use only)</i> Für Vermerke des Härtefallausschusses Eingegangen am:  Geschäftszeichen:
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**Application for refund of the contribution for the semester ticket for the \_\_\_\_\_-semester 20 \_\_\_\_\_**

**I hereby apply for a refund of the fee for the semester ticket, because I have exmatriculated within two months of the start of the semester and am not entitled to reimbursement of the social contribution according to § 4 of the contribution regulations.**

**Deadline for application: within two months after the start of the semester.**

**The following documents, in original or copy, are attached** *(check what applies)*

Certificate of deregistration from the university (mandatory)

Other: \_\_\_\_\_

**ATTENTION - IMPORTANT NOTE**

The processing time of the application can take up to 4 - 6 weeks. Please take this into account when planning a stay abroad, for example.

This application can only be made by students of the University of Cologne. Applications from students of other universities will not be processed by us. These must be submitted to the respective university.

*I am aware that incorrect and/or incomplete information can be prosecuted under criminal law and that unjustly refunded amounts can be claimed back.*

*I assure that my details are correct and complete.*

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Student Signature