

Request for the Remission/Reimbursement of Tuition Fees



To be completed by the student

Personal Details	
First and last name:	
Student number (Matrikelnummer):	
Date of birth (DD/MM/YYYY):	Phone number:
Email: (UAS account only)	
Reason for Remission/Reimbursement <i>(please tick the appropriate box)</i>	
<input type="checkbox"/> disability of 50 % (in case of enrolment in a degree programme) <input type="checkbox"/> completion of the degree programme by 31/10 or 31/03 (provided that all courses were completed in the previous semester) <input type="checkbox"/> extraordinary reasons (in case of termination by the student) such as <input type="checkbox"/> pregnancy <input type="checkbox"/> prolonged (severe) illness which impedes the continuation of the study programme <input type="checkbox"/> personal bankruptcy <input type="checkbox"/> similar unforeseeable economic or private reasons (e.g., the unforeseeable need to care for close relatives, etc.) <hr/> <input type="checkbox"/> authorised interruption (at the beginning of the semester, meaning 01/09 or 15/02) <input type="checkbox"/> death of the student at the beginning or in the course of the current semester	

Supporting evidence is to be provided for all indicated reasons!

Please provide your bank details (IBAN, BIC) for a possible (re)transfer. Please note that your refund is only possible with current and correct information!

IBAN:	BIC:
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The relevant documents as well as the duly completed form are to be submitted to csc@fhstp.ac.at no later than by 31/03 (for the summer semester) or 31/10 (for the winter semester). Otherwise, the application will not be considered.

_____	_____
Date	(e-)signature applicant
Checked on	Approved yes <input type="checkbox"/> no <input type="checkbox"/>
	(e-) signature CSC