

An die
ÖH-Mozarteum
Mirabellplatz 1
5020 Salzburg
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Application to the Hardship Fund of the University Mozarteum Salzburg
IMPORTANT: Please attach all relevant documents to the application!

1. Personal Data

Last name: _____

First name: _____

Phone number: _____

E-mail: _____

Address: _____

Nationality: _____

Place of birth: _____

Date of birth: _____

2. Studies

University: _____

Field of study: _____

Matriculation number: _____

Admitted since (current study program): _____

Current semester: _____

Leave of absence (when, how long): _____

Completed first or second stage of studies? ☐ No ☐ Yes,

on: _____

Change of study program? ☐ No ☐ Yes

Previous field of study: _____

Date of change: _____

Number of passed exams in the last two semesters: _____

Minimum study duration already exceeded? ☐ No ☐ Yes, reason:

3. Studienbeihilfe

Are you receiving a study grant? ☐ No ☐ Yes, monthly amount: € _____

If no, why not?

Have you ever received a study grant? ☐ No ☐ Yes, when and why not anymore:

4. Family Situation

Marital status: ☐ Single ☐ Married ☐ Divorced ☐ Civil partnership
☐ Separated ☐ Widowed

5. Monthly Income (Household)

(Proofs required)

- ☐ Employment: € _____
- ☐ Unemployment benefit/emergency aid: € _____
- ☐ Pension: € _____
- ☐ Parental allowance/child benefit: € _____
- ☐ Housing allowance: € _____
- ☐ Family allowance (own or partner's): € _____
- ☐ Family allowance for children: € _____
- ☐ Alimony: € _____
- ☐ Support from parents/relatives/friends: € _____
- ☐ Support from public institutions (federal, state, municipality): € _____
- ☐ Non-monetary support: _____
- ☐ Other income (summer job etc.): € _____

► **Total monthly income:** € _____

6. Monthly Expenses (Household)

(Proofs required, except food costs)

- ☐ Rent incl. utilities: € _____
 - ☐ Energy/heating: € _____
 - ☐ Household insurance: € _____
 - ☐ Broadcasting fee: € _____
 - ☐ Health insurance: € _____
 - ☐ Study-related costs: € _____
 - ☐ Food/living expenses: € _____
 - ☐ Travel costs: € _____
 - ☐ Childcare costs: € _____
 - ☐ Other: € _____
- **Total monthly expenses:** € _____
-

7. Children and Family

Children? ☐ No ☐ Yes

Name & date of birth: _____

Number of siblings: _____

Of which in education: _____

Childcare facility:

- Name & address: _____
- Monthly costs (incl. heating/material contributions): € _____

Start of care: _____

8. Partner

Name: _____

Occupation: _____

Monthly income: € _____

Address: _____

9. Parents

Mother:

- Name: _____
- Occupation: _____
- Monthly income: € _____

Father:

- Name: _____
- Occupation: _____

Monthly income: € _____

10. Reason for Application

(Please describe your current financial hardship in detail)

11. Previous Support

Received support in the last 12 months (e.g., student union, Caritas etc.)? ☐ No ☐ Yes

- From whom: _____
 - Amount: € _____
 - When: _____
-

12. Bank Details

Bank: _____

IBAN: _____

BIC: _____

**I confirm with my signature that the information provided is accurate.
In particular, I confirm that I do not receive any undeclared income.**

.....
Date

.....
Signature

Required Documents (copies only):

Incomplete applications—especially regarding financial information—will be rejected due to time constraints.

- ☒ Registration certificate of yourself, your partner, your child/children
- ☒ Enrollment confirmation
- ☒ All pages of the study grant decision (including negative decisions)
- ☒ Proof of other scholarships
- ☒ Proof of academic success
- ☒ Confirmation of leave of absence from studies
- ☒ Income statements of yourself, your parents, or your partner
- ☒ Complete, consecutive bank statements of the last three months before application from your account(s)
- ☒ If available: copy of your savings book
- ☒ Birth certificate of your child(ren)
- ☒ Alimony agreement, confirmation of advance maintenance payment, payment confirmation for alimony
- ☒ Payment confirmation of the last three months' rent
- ☒ Proofs for all income
- ☒ Further evidence of your hardship (e.g., medical certificates, theft report, therapy and/or treatment cost proof, confirmation of rent arrears, etc.)

Data Protection Regulations

- All personal data and documents are treated with utmost care and confidentiality.
- Within the Student Union Mozarteum, only members of the allocation committee have access to the application documents.
- Personal data and documents will never be shared with third parties.
- Personal data and documents are used exclusively to process the scholarship and calculate the respective amount.

All application documents are archived and inaccessible to unauthorized persons for a period of 7 years.

Declaration of Consent

- I confirm with my signature the accuracy of the information.
- In particular, I confirm that I do not receive any undeclared income.
- I will provide additional documents requested by the Student Union Mozarteum upon demand.
- I commit to repaying the scholarship in whole or in part if it was granted based on false information.
- I acknowledge the above data protection regulations and agree to them.
- I am aware that my application will not be processed if documents are incomplete.

I understand that there is no legal entitlement to a scholarship, and awarding a scholarship is at the discretion of the Student Union Mozarteum allocation committee.

.....
Place, Date

.....
Signature