



Form support and emergency fund "Ukraine"

Personal data

Surname, Name:	Email:
Citizenship:	
<i>Current residential address for postal delivery</i>	
Street, Nr.:	Postal Code, City:

I hereby apply for _____ (Surname, First Name), support from the Viadrina Support and Emergency Fund for Students and Researchers Refugees from Ukraine and explain my financial hardship in writing below.

Please explain your financial need below:

As far as possible, please enclose proof of your indigence.



Other Funding

Social assistance (please delete as applicable), e.g. (Yes/No)

Are you already receiving benefits for living expenses in form of social assistance (Sozialhilfen)?
(Yes/ No)

Scholarships/ other grants

Do you receive scholarships or other funding? (Yes/ No)

If **yes**, please list the scholarship/funding program and the amount

I certify that the information provided is complete and true.

I acknowledge that the information on this form will be stored and used electronically by the scholarship office in compliance with the data protection act. I consent to the processing and use of my personal data including any specially protected data voluntarily disclosed by me - for the purpose of processing the form.

<hr/> Place, date of application	<hr/> Signature
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This application must be sent electronically in a PDF file to Viadrina International Affairs (stip@europa-uni.de).