

# Application for the Social Fund of the ÖH University of Graz

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

## Check-List:

- Completed and signed **application form**
- Confirmation of enrollment** for the current semester
- Copy of **student ID card**
- Transcript of records** for the last two semesters
- Proof of income** of the applicant (including social benefits and financial support from family and friends), and if applicable, proof of income of partner, parents, children, or siblings living in the same household (including social benefits and support from family and friends)
- Receipts** or documents for expenses above € 200,00 (with a short explanation)
- Continuous bank statements of the last six months** (for the applicant and/or all persons living in the same household)
- Residence registration form** (Meldezettel) of the applicant and, if applicable, of all people living in the same household, including proof of relationship (marriage certificate for spouses; joint sworn declaration for partners; birth certificate for parents/children)
- For third-country nationals: a copy of a valid **residence permit**
- Signed sworn declaration** confirming the truthfulness of all information and documents provided in this application (false declarations may have legal consequences)
- Signed consent** to the processing of personal data (as per Art. 5-9 DSGVO). For digital applications, a scanned signature or qualified electronic signature (e.g., iD Austria) is sufficient.
- Social insurance record** to prove employment. If not available, a written confirmation from the insurance office (e.g., by e-mail) stating that such a record cannot be issued is sufficient.
- Rental agreement** of the applicant (if available)
- Proof of **existing savings** (e.g., savings account, securities account, building savings contract)

**Incomplete information or missing documents will result in rejection of the application!**

## Personal Information:

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

E-Mail (Uni): \_\_\_\_\_

Phone number: \_\_\_\_\_

Street: \_\_\_\_\_ Postal code & city: \_\_\_\_\_

Nationality: \_\_\_\_\_

Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Marital status: \_\_\_\_\_

Gender  female  male  non-binary  diverse

Do you have children?  yes  no

If yes, how many: \_\_\_\_\_ and what age? \_\_\_\_\_

Field of study: \_\_\_\_\_

Current semester: \_\_\_\_\_

Have you already received support from the Social Fund?  yes  no

If yes, when? \_\_\_\_\_

Have you received funds from the ÖH Federal Representation's Social Fund last semester?  yes  no

If yes, how much: \_\_\_\_\_

Are you currently receiving other financial support from the ÖH?  yes  no

If yes, which one? \_\_\_\_\_

Do you have savings or other assets?  yes  no

Additional information: \_\_\_\_\_

\_\_\_\_\_

## Information about your monthly income

From which income do you live? Please present your financial situation truthfully.

To prove financial need, the applicant must clearly list the entire income of the last 6 months as well as all monthly expenses. All individual expenses exceeding EUR 200 must be specified and justified. All entries must be supported by bank account statements, with income and expenses clearly marked.

If you receive money in cash from parents (or someone else), a signed declaration from the parents (or other person) is required.

### Who lives in your household?

alone  shared flat  with partner  with siblings  with parents

If you live with your parents, please fill in:

Name of mother/father	Adress	Occupation	Monthly income (EUR)

If you live with a partner, please fill in:

Name of your partner	Adress	Occupation	Monthly income (EUR)

Monthly overview of income and expenses for: \_\_\_\_\_

Income	Amount in €
Total income:	€

Expenses	Justification (for expenses exceeding EUR 200,00)	Amount in €
Total expenses:		€

Monthly overview of income and expenses for: \_\_\_\_\_

Income	Amount in €
Total income:	€

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Monthly overview of income and expenses for: \_\_\_\_\_

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Monthly overview of income and expenses for: \_\_\_\_\_

Income	Amount in €
Total income:	€

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Monthly overview of income and expenses for: \_\_\_\_\_

Income	Amount in €
Total income:	€

Expenses	Justification (for expenses exceeding EUR 200,00)	Amount in €
Total expenses:		€

## Description of Current Emergency Situation

Please provide a typed or block-letter written description.  
(Unreadable handwriting will result in automatic rejection of the application.)

## Bank Details

IBAN: \_\_\_\_\_

BIC: \_\_\_\_\_

Account holder: \_\_\_\_\_

The applicant is responsible for ensuring that the application is complete and correctly filled out and that all information is supported by suitable documentation.

The ÖH University of Graz assumes no liability for transmission errors or other mistakes in the submission of the application; all liability is excluded.

Submitting this application does not entitle the applicant to a legal claim for support from the Department of Social Affairs of the ÖH Uni Graz.

**By signing, I confirm that all information provided is truthful, and that I have read, understood, and acknowledged the attached data protection declaration as well as the notes above.**

\_\_\_\_\_  
Place and date

\_\_\_\_\_  
Signature