



# Application for the approval of individual-study activities during the advanced-study period and for their retroactive financial support

For administration only:  
Eingegangen am: \_\_\_\_\_  
Bearbeitungsnummer: \_\_\_\_\_

## 1. Applicant

Last name, first name: \_\_\_\_\_  
Street address: \_\_\_\_\_  
Zip code, city: \_\_\_\_\_ Matriculation number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Telephone number: \_\_\_\_\_  
Study program: \_\_\_\_\_  
 Bachelor  Master  
 Lehramt  Staatsexamen  
Current degree: Bachelor: yes  / no  Semester in Master: \_\_\_\_\_ Semester total: \_\_\_\_\_

## 2. Type of individual-study activity

Research-lab with ECTS: yes  / no   Bachelor-/Master-thesis  Conference  Exhibition  
 Research project  Workshop  Further internships  Other  
Start of the activity: \_\_\_\_\_ End: \_\_\_\_\_  
Institution/University, City, Country: \_\_\_\_\_  
Research group: \_\_\_\_\_  
Topics or theme of the individual activity:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Motivation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If possible: result/contribution  Research/lab report  Bachelor-/Master-thesis  Lecture  Poster  Other: \_\_\_\_\_



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### 3. Estimated expenses for which financial aid is applied

- Singular travel expenses (arrival- und departure to the residence)       Rental fee/accommodation(s)       Other (e.g. Visa)

Short list of expenses for rent, travel and others (Euro):

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Total costs (Euro):

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### 4. Additional Support

I have applied at other organisations to receive financial aid:      yes  / no

Sources such as Erasmus, PROSA, DAAD, etc.:

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The official letter is still pending:      yes  / no

I receive further financial aid for my activity:       no

- Yes, I received/will receive payments (e.g. salary of an institution, state, grants) from the following sources:

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I receive payments in the amount of \_\_\_\_\_ Euro

### 5. Declaration of the applicant

I confirm the accuracy of this statement and affirm that the individual-study activities will advance my education. I have read the handout on applying for support. I will provide original invoices/receipts for all incurred expenses for which financial aid is applied. I understand that the aid is only possible for students in the 5th semester and higher and that it can be given only retroactively.

\_\_\_\_\_  
City, Date

\_\_\_\_\_  
Signature



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### 6. Statement of a full professor of Faculty 18

I confirm that the above study activities will advance the applicant's education. The applicant is known to me and will benefit from these activities.

\_\_\_\_\_  
City, Date

\_\_\_\_\_  
Signature

Prof. Dr. \_\_\_\_\_  
(in printed letters)

### 7. Decision of the Dean

Positive, amount of support: \_\_\_\_\_

Negative, reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
City, Date

\_\_\_\_\_  
Signature

Prof. Dr. \_\_\_\_\_  
(in printed letters)

### 8. Administration

Applicant notified on: \_\_\_\_\_

\_\_\_\_\_  
City, Date

\_\_\_\_\_  
Signature