**Duale Hochschule Baden-Württemberg Karlsruhe**

**Baden-Wuerttemberg Cooperative State University**

Application for Students of Partner Institutions (Study)

Personal Information

|  |  |  |  |
| --- | --- | --- | --- |
| Last name |  | First name |  |
| Sex(M/F) |  | **Date of birth** |  |
| Place of birth |  | **Email** |  |
| Phone |  | **Mobile phone** |  |
| Country |  | **City** |  |
| Post code |  |
|  Address |  |
|  Do you want to have a German buddy? | 🞏 Yes 🞏 NoIf yes: 🞏 female 🞏 male 🞏 male or female |
|  I agree that the following contact details can be forwarded | 🞏 Email 🞏 Mobile phone (e.g. for WhatsApp contact)🞏 not necessary (I’m not interested in the buddy program) |
| Interests | 🞏 Sports:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_🞏 Hiking🞏 Cooking🞏 Cultural activities (museum, theater, movies …)🞏 Others:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Language Skills (*Common European Framework of Reference for Languages*)

|  |  |
| --- | --- |
| German language level\* | 🞏 A1 🞏 A2 🞏 B1 🞏 B2 🞏 C1 🞏 C2🞏 none |
| English language level\* | 🞏 A1 🞏 A2 🞏 B1 🞏 B2 🞏 C1 🞏 C2 |
| Other language and level | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

\*Please attach a language certificate if available.

University Information

|  |  |
| --- | --- |
| Home University |  |
| Major |  |
| Which academic year (out of total) |  |
| Courses to be taken at DHBW | 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_8. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_9. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| Duration of stay[2] | From\_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ \_\_\_months |
| Accommodation in a student residence | 🞏Yes 🞏No |
| Participation in preparatory German course for beginners | 🞏Yes 🞏No |
| Person to contact in case of emergency | Name: Contact No.: |

[2]Format of date: DD/MM/YY

Detailed information about the reservation of a room in a student residence will be provided after receipt of your application.

I herewith acknowledge that the room reservation has to be confirmed within two weeks after receipt of the information. Without confirmation, the room reservation will be cancelled.

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

Signature of the student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This application form is valid only with the following data and signature:

|  |  |
| --- | --- |
| International Coordinator at home university |  |
| Phone |  | Fax |  |
| Email  |  |
| Signature (stamp) of the International Coordinator | I hereby confirm the data the student has given with this application form. |

**To be enclosed:**

**=> Copy of identity card (or passport) and proof of health insurance**

**=> Enrollment certificate of home university**

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

Signature of the student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Duale Hochschule Baden-Württemberg Karlsruhe**

**Baden-Wuerttemberg Cooperative State University**

**International Office**

**Erzbergerstr. 121**

**76133 Karlsruhe, Germany**

**Alexandra Braswell, Marina Weißenborn**

**Tel. 0049-721-9735-707/-729**

**InternationalOffice@dhbw-karlsruhe.de**