

# Student Data Sheet

Matriculation No.

Family name

First name(s)

Street, house no./block no./floor/door no.

Country code      ZIP code

Town

Living with (c/o)

Telephone No.

## *I hereby request the following change to my personal data:*

**Change of name**

required proof: marriage certificate or document confirming change of name; original or notarized copy

from

to

**Notification of the social security number:**

Required proof: E-Card

Social security number    day    month    year

**Change of citizenship**

Required proof: Certificate of citizenship

from

to

## *I hereby request the following change to my study programme data:*

**Terminate the following degree programme:**

Degree programme

**Commence/continue a regular degree or non-degree programme or a university study programme:**

Degree or study programme

\_\_\_\_\_  
Date and student's signature

Not to be completed by the student

AUR

Datum

Tag    Monat    Jahr

Zusatzprüfung

Änderung durchgeführt:

2 0

