

A...kademie der bildenden Künste Wien

Tuition fee refund – application form [based on the Studienbeitragsverordnung (study fee regulations) 2004] *)

Full name:	
Matrikelnummer (Student ID):	
Address:	
Phone number, email:	

submits a request for a refund of tuition fees for

WS/SS _____ amounting to € 363.36 – paid on: _____

Reason for refund:

This amount is payable to the account of:

Full name:	
Bank:	
Bank sort code:	
IBAN	
Account number:	

I guarantee the accuracy of the above data. I also confirm that I have not received any tuition fee refund from any other institution (e.g. Studienbeihilfenbehörde, i.e. “federal aid for students”) and that I am not registered with any other Austrian university where tuition fees must be paid. I enclose all documents required by the study fee regulations (Studienbeitragsverordnung).

Date & Signature Student

***) A refund request for the winter semester must be submitted by 31 March, a refund request for the summer semester by 30 September.**

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Evidence to be submitted

For providing proof of the reasons stated in Section 92 Subsection 1 Subpara. 4 and 6 Universities Act 2002 the following applies:

1. The student must submit medical proof of illness or pregnancy in case of non-attendance of longer than two months during the semester.
2. If the student is the main carer of children of up to 7 years of age or until the child/ren enter(s) school at a later date, he/she has to submit the following documents as proof:
 - a. Birth certificate of the child/ren,
 - b. Residence Registration Form (Meldezettel) of the student,
 - c. Residence Registration Form (Meldezettel) of the child, with the same address as the respective student's,
 - d. a statutory declaration by the student confirming that the child is mainly in his/her care.
3. Any disability according to Section 92 Subsection 1 Subpara. 6 Universities Act 2002 must be proved through the submission of the Behindertenpass (Disabled Persons Pass) issued by the Bundessozialamt (Federal Social Office).

Proof submitted in other languages must be accredited.

I acknowledge the above information:

Date & Signature Student

Student's information is accurate:

Date & Signature, Studien- u. Prüfungsabteilung (Registrar's Office)

- Approved**
- Not approved**

Date:

Mag. Dr. Ingeborg Erhart
Vice-Rector for Art and Teaching

Reason for rejection of refund application: