

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

Mr/Ms: \_\_\_\_\_

*Matrikelnummer* (Student ID): \_\_\_\_\_

Address: \_\_\_\_\_

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

submits a request for a refund of tuition fees for

WS/SS \_\_\_\_\_ amounting to € 363.36 – € 399.70 – 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

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

**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:
  - Birth certificate of the child/ren,
  - Residence Registration Form (*Meldezettel*) of the student;
  - Residence Registration Form (*Meldezettel*) of the child, with the same address as the respective student's,
  - 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

\_\_\_\_\_   
Student's signature

**Student's information is accurate:**

Date/Signature  
*Studien- u. Prüfungsabteilung* (Registrar's Office)

**Approved:**

**Not approved:**

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

**Date:** .....

**Reason for rejection of refund application:**

\_\_\_\_\_   
\_\_\_\_\_   
\_\_\_\_\_