



- ONLY IF APPLICABLE -

Honorary declaration for additional funding in the Erasmus program

I, _____ (name, surname), born _____ (date), hereby confirm that I will spend my study abroad at the Erasmus partner university _____ (name of host university) in _____ (country) during _____ (semester, e.g. fall/spring/year)

I confirm that I have received the "Information Sheet on Additional Funding" and that I am aware of the application conditions and criteria for additional funding.

I would like to apply for the following additional funding and hereby declare on my honor that I meet the conditions for this according to the "Information sheet on additional funding", that I have the relevant evidence and that I can present this on request.

- ☐ I would like to apply for additional funding as a student with child(ren).
- ☐ I would like to apply for additional funding as a student with a disability.
- ☐ I would like to apply for additional funding as a student with a chronic illness.
- ☐ I would like to apply for additional funding as a student from a non-academic family background.
- ☐ I would like to apply for additional funding as a continuously employed student.

Since multiple funding is not possible, you can choose one of the additional grants if several criteria apply to you.

I have made all statements to the best of my knowledge and I acknowledge that in case of false statements I will have to repay the approved funds.

Participant
Last Name, First Name:
_____ Signature
_____ Place, date

Please send us the signed document and keep the original with your original signature with you.