



University of Cologne

The Chancellor
International Office

Application for a refund of the semester fee

Please enter your student registration number

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Ref

I, hereby apply for a refund of the semester fee

Last name

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First name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Street

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Post code, place

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paid for the

winter semester _____ / _____ **summer semester** _____

in the amount of _____ EUR for one of the following reasons:

- Removal from the students' register (only where a refund claim exists)**
- Withdrawal from the degree course (only for first semesters)**
- Academic Leave**
- Overpayment**

Please transfer the amount to be refunded to the following account:

IBAN

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BIC

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Account holder (if different from applicant): _____

Important notice:

In the event of exmatriculation, the semester fee can only be refunded if the exmatriculation application for which the semester fee was paid is submitted to the International Office before the beginning of the semester (31.3. or 30.09.).

Date and student's signature

To be completed by the University of Cologne	
Referenz Nr.: 20 __ -	Betrag:
Referenz Nr.: 20 __ -	Betrag:
Referenz Nr.: 20 __ -	Betrag:
Referenz Nr.: 20 __ -	Betrag:
Erstattungssumme:	

Sachlich richtig:

Rechnerisch richtig:

Köln,

Unterschrift

Unterschrift

Dienststempel