University of CologneThe Chancellor Department 92 / International Office



Minor

Universal consent for underage applicants and students As the underage applicant's / student's legal representative(s), I / we	
Parent / legal guardian	
Address	
give my / our son / daughter	
Name	Date of birth
study programme and enrolment at the University of	egal transactions necessary in the framework of his / he
Summer Semester 20 and / or Winter Semester 20	
Included with the universal consent is a copy of	my / our legal identification.
Place, Date	Signature parent / legal guardian
Place, Date	Signature parent / legal guardian
To be completed by the International Office	
Matriculation number:	
Study programme:	