



An die
Universität Konstanz
Abteilung Studium und Lehre
Studierenden-Service-Zentrum
78457 Konstanz
GERMANY

Contact

Phone:
+49 7531 88-2664 | -4473 | -4997 | -3639

Email via contact form:
www.uni.kn/en/study/get-in-touch

Application for refunding of paid fees

Surname, first name:		Student-ID-no. (applicant-no.):	01/
Address (street, post-code, city):			
Phone/mobile/email:			

Important: Please check off the applicable and enclose all required documents!

I apply for refunding of the already paid fees for the

Summer Semester:	20 ____	resp. Winter Semester:	20 ____ / 20 ____
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for the following reason:

Exmatriculation

to the end of Summer Semester

20 ____

to the end of Winter Semester

20 ____ / 20 ____

with immediate effect at the (date)

Return of the study place at the
(only valid for applicants)

Overpayment, double payment, other reasons (please explain in short)

Comments concerning the application:

Please turn over!

