

## APPLICATION FOR FUNDING

*Only fully completed applications can be processed.*

Name of the project:	
Period of the project:	
Number of participants:	Of which HfM students:
Applicant:	Study program:
Street, house number:	
ZIP code, city:	
E-Mail:	
Description of the project, justification of eligibility:	
Breakdown of expected expenditure:	Breakdown of expected revenue:
Total:	Total:
Applications to other funding bodies:	
The following amount is requested:	<input type="checkbox"/> Support level I <input type="checkbox"/> Support level II
Application for the following amount: <b>(to be filled in by the StuRa)</b>	<input type="checkbox"/> is funded by the StuRa <input type="checkbox"/> is recommended to the LZSG

.....  
Date, signature of applicant

.....  
signature of StuRa

## ACCOUNTING

To be submitted to the StuRa together with original invoices in accordance with the deadline.

Name of the project:
----------------------

Date of receipt of the funding confirmation:
--

Actual expenditure:	Actual income (incl. other subsidies):
Total:	Total:

Please enclose the **original receipts** for all expenses/income!

Account holder:	Bank, location:
IBAN:	BIC:

.....  
Place, date

Signature of applicant

*The signature confirms the accuracy of all information and completeness of the supporting documents.*