Application to Withdraw from First-Time Enrollment/Admission



DEADLINE: No later than one month after the start of lectures! Family Name (Please write legibly!) Given Name		The President The Vice President For Academic Affairs and Diversity Unit Student Service
Street, House Number, (Room Number, if Applicable)	Additional Address Information(c/o)	C _F
Zip Code City		
Degree Programme / Subjects	Degree (i.e. Bachelor/Master)	
I HEREBY REQUEST TO WITHDRAW FROM FIRS	T-TIME ENDOLLMENT & STUDENT	ID NIIMBER ->
THEREBY REQUEST TO WITHDRAW TROWN FIRS		ID NUMBER $\rightarrow $ FION NR $\rightarrow BW $
	· 7.11 E1-07.11	
I HEREBY REQUEST TO WITHDRAW FROM A	ADMISSION • APPLICAT	TION NR \rightarrow BW _ _ _ _
I have already paid the Semester and Adn	ninistration Fees.	
I have already received my student data attached them to this form.	letter with my student ID/sen	nester ticket and have
<u>IMPORTANT</u> : This form will be automatically	rejected if it is not submitted tog	ether with all required documents.
	ain enroled. You will <u>not</u> receive a	
If you are already enroled, you will be cha (VwKostO-MWK, https://www.rv.hessenrecht.hessen.de) This fee will be automatically deducted from	•	the processing of this form
⇒ I ensure that I will, inform all affected will no longer be enrolled.	parties (i.e. BAföG office, child	allowance office, etc.) that I
⇒ Please be sure to include your bank det The refund will be made via bank trans have any questions regarding your refundance.	fer to the account listed below	(in approx. 3-4 weeks). If you v.tu-darmstadt.de
Bank Name and Location (German banks only!)	Account Holder	
Bank Name and Location (German banks only!) IBAN (22 digits in length)	Account Holder BIC	
	BIC	
IBAN (22 digits in length) X Date and Student's Signature (if under 18 years of age, additional signature)	BIC	