z. Hd. Claudia Theis

Request for reimbursement of fees

Herewith I request the reimbursement of the following fees:

☐ Travel costs for IW / PSS

Summer term_____ Year , or Winter term_____ Year . _____ €

☐ Semester fee at UdS

Summer term_____ Year , or Winter term_____ Year _____ €

☐ Language courses (only those required for AMASE)

Summer term_____ Year , or Winter term_____ Year . _____ €

Total amount: _____ €

EUSMAT
European School of Materials

Prof. Dr.-Ing. Fank Mücklich
Chairman

Dr. – Ing. Flavio Soldera
General Manager

European School of Materials
Saarland University
Campus D3.3

66123 Saarbrücken
Germany

Student's complete name and current address

.....

.....

.....

.....

Student's Signature: ✕_____

Account owner

Name of bank:

.....

IBAN:

.....

.....

BIC / SWIFT:

.....

Please bring or send the reimbursement form and the receipts to the EUSMAT Office, without a proof of payment a reimbursement is not possible.

++++++++++++++++++++++++++!! Please, do not fill in the following !!++++++++++++++++++++++

Dem obigen Antrag kann (teilweise) stattgegeben werden. Die Universitätskasse wird angewiesen aus dem Fonds_____ des Betrags von_____ € auf das vorgenannte Konto zu überweisen. Sachlich richtig und festgestellt

Saarbrücken, den ✕ _____

Sachbearbeiter

Überweisung veranlasst am ✕_____

C. Theis