

Application for enrolment in doctoral studies for h_da graduates

In accordance with §2 of the regulation on the processing of personal data, Hochschule Darmstadt is obliged to collect the following data.

For winter semester

For summer semester

Personal data

Surname

First name

Former name

Gender

Date of birth

Place of birth

1. Citizenship

2. Citizenship

h_da enrolment number

Email

Address

Street, house number

Postcode, place of residence

Health Insurance

Insured person number

Certificate of health insurance or certificate of exemption from private health insurance enclosed

Details on Doctoral Studies

Doctorate (first enrolment) at the doctoral centre

Supervision agreement for preparation phase attached

Notice of acceptance at the PZ enclosed

Cooperative doctorate (second enrolment)

with first enrolment at the university

Notice of acceptance from title-awarding institution enclosed

Concurrent enrolment at another university

yes no

Name of University

City, state, country

Study programme

Intended degree

Certificate of enrolment enclosed

To facilitate a better communication, I agree that my contact details will be forwarded to the Graduate School. I confirm this by signing this page.

I confirm that the above information is complete and true. I am aware that false information may lead to the cancellation of my enrolment. This also applies in the event that false or omitted information is only discovered after enrolment.

Date

Signature