

Application for a subsidy for the Semesterticket from Social Funds

This application is based on the Sozialfonds-Satzung (Social Funds Statutes) from the student body of FU Berlin.

As of January 2025

Term of application: SoSe WiSe 20

I have already made an application before: Yes No

I am **newly** enrolled: Yes No

Eingangsstempel

Personal Details

Last name*		First name*		Enrollment number*	
c/o		Street, Number*		Post code, City*	
Telephone number		E-Mail*		Date of Birth*	

Bank Details

IBAN*		BIC*	
Account holder (First and last name, if not you)			

Hereby, according to the ordinance of Semesterticket pursuant § 18a V BerlHG, I apply for a subsidy for the costs of the Semesterticket.

I declare in accordance with § 2a of the Social Funds statutes the following hardship(s) in the calculation period:

<input type="checkbox"/> I have written my final thesis in at least one month of the calculation period.
<input type="checkbox"/> I have completed an internship during the calculation period, which is prescribed in the study regulations.
<input type="checkbox"/> I only have a small income . (My average income according to § 2c of the Social Fund Statutes is lower than my average need according to § 2b of the Social Fund Statutes.)
<input type="checkbox"/> My passport contains a note on the restriction or absence of a work permit .
<input type="checkbox"/> I was pregnant during the calculation period.
<input type="checkbox"/> I am a single parent of one or more children under the age of 18.
<input type="checkbox"/> I am over 65 years old.
<input type="checkbox"/> I have a reduced earning capacity or am in possession of a disabled person's pass .
<input type="checkbox"/> I receive integration assistance .
<input type="checkbox"/> During the calculation period, I received benefits for living expenses in accordance with SGB II or SGB XII or have children who are entitled to benefits for living expenses in accordance with SGB II or SGB XII.
<input type="checkbox"/> During the calculation period, I had to pay special costs for medical or psychological care that are not covered by health insurance and that amount to more than € 250.
<input type="checkbox"/> I received benefits under the Federal Training Assistance Act (BAFöG) during the calculation period.
<input type="checkbox"/> During the calculation period, I received benefits in accordance with the Federal Parental Benefits or Parental Leave Act .
<input type="checkbox"/> I am in possession of a proof of arrival from the Federal Office for Migration and Refugees (BAMF) or have another positive decision from the BAMF regarding an asylum application .
<input type="checkbox"/> I claim the following other comparable hardship(s) not covered by any of the reasons above:

According to § 2b of the Social Funds Statutes, I declare the following financial needs:

<input type="checkbox"/> I paid rent (including heating costs) during the calculation period:	€ per month	
<input type="checkbox"/> I paid for my health insurance during the calculation period:	€ per month	
<input type="checkbox"/> Due to an illness or a disability I need a special costly diet in the amount of:	€ per month	
<input type="checkbox"/> I repaid debts during the calculation period:	€ in total	
<input type="checkbox"/> I am liable to pay maintenance and support to the following people:		
Name:		
1. Person:	<input type="checkbox"/> Spouse <input type="checkbox"/> Other	
		Date of birth:
2. Person:	<input type="checkbox"/> Child	
3. Person:	<input type="checkbox"/> Child	
4. Person:	<input type="checkbox"/> Child	
<input type="checkbox"/> I had other expenses in accordance with § 2b, paragraph 10 of the Social Fund Statutes:		

I had the following income according to § 2c of the Social Funds Statutes:

(Income includes all money that you use to cover your living expenses, e.g. wages, maintenance, parental support, BAFöG, loans, child benefit, grants, housing benefit, scholarships, ...)

Assets according to § 2c of the Social Funds Statutes

I declare that I did not have assets of €5,000 or more at my disposal during the calculation period.

I certify that I have provided the information in this form and the attachments truthfully and to the best of my knowledge.

I am aware that I must pay the semester ticket fee in full to the University, regardless of whether I am granted a subsidy, so that all requirements for enrollment and re-registration are met.

Date Signature

Supplement: Explanatory notes on the application

1. Eligibility for a subsidy

Eligible for a grant is who

1. has paid the fees for the semester and
2. can claim particular hardship within the meaning of the statutes for the calculation period and
3. whose income does not exceed their needs on average during the calculation period and
4. who did not have assets of €5,000 or more at their disposal during the calculation period

2. Application process and supporting documents

The signed application must be sent to the semester ticket office by email (PDF) or by post by the **deadline**.

All supporting documents can be submitted later.

Upon receipt of the application, the Semesterticket Office will send a list of the supporting documents required for the respective application. A detailed list can be found on our website at <https://astafu.de/semesterticket/faq/zuschuss>

3. Calculation period

According to the Social Fund Statutes, the circumstances during the semester of application do not count for the application, but during the calculation period prior to the semester of application. The calculation period always includes the 5 months prior to re-registration for the semester of application. For newly enrolled students, the 4 months before up to and including the month of enrollment (i.e. also 5 months)

	Regular student:	Newly enrolled students:
Winter term:	March 1st – July 31st	May 1st – September 30th
Summer term:	October 1st – February 28th/29th	November 1st – March 31st

4. Contact

The semester ticket office will be happy to provide you with further information. The current office hours can be found on our website.

Tel.: 030 83909140 (only during office hours)

E-Mail: semstixbuero@astafu.de

Website: www.astafu.de/semesterticket

Address: Semesterticketbüro des AStA FU Berlin
Thielallee 36
14195 Berlin