

Name, surname:	Place, date:
Street, house number:	Date of birth:
Postcode/ZIP, town:	Registration number: / Student ID number:

**An die
Zentralverwaltung
der Universität Würzburg
- Referat 2.2 -
Sanderring 2**

97070 Würzburg

Declaration Regarding Studies in the Degree Programme Akademische Sprachtherapie/Logopädie (Academic Speech and Language Therapy/Logopedics)

I understand that

- this degree programme comprises courses offered by the University of Würzburg and courses offered by Berufsfachschule für Logopädie Würzburg (vocational college for speech therapists) and that
- only those students that have signed a training contract with Berufsfachschule für Logopädie Würzburg will be able to attend the courses offered by the Berufsfachschule.

I understand that I will only be able to graduate from the degree programme Akademische Sprachtherapie/Logopädie if I successfully complete the courses offered by both of the above-referenced institutions.

Signature

Signature of parent or legal guardian
(if the student is underage)

Legal basis for data collection:

The legal basis for the collection of personal data is Section 42 Subsection 4 Bayerisches Hochschulgesetz (Bavarian Higher Education Act, BayHSchG) as amended from time to time. According to the aforementioned Act, every student is obliged to provide all personal data requested in this document in those fields that are not marked 'optional'. These data will be used by the University of Würzburg for administrative purposes in connection with enrolment and for generating university statistics. Failure to provide complete information may lead to a denial of enrolment. All data will be processed in accordance with the provisions laid down in the Bayerisches Datenschutzgesetz (Bavarian Data Protection Act, BayDSG) as amended from time to time.