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Manually filled forms (fully or partially) will not be  
accepted.

Matriculation number

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Programme code:  
**Q 794 440 202 PhD**



MEDIZINISCHE  
UNIVERSITÄT  
INNSBRUCK

## Applicant

Academic degree, first Name, last name, academic degree

Phone

@student.i-med.ac.at

Email (MUI student email only)

## Application for exemption from payment of the tuition fee for the winter term 2019/20

The applicant hereby requests an exemption from the payment of the tuition fee for the winter term 2019/20.

### Confirmation

Hereby I, \_\_\_\_\_, declare that I will not claim grounds for exemption in accordance with  
§ 92 UG (Universitätsgesetz, Universities Act) for the respective term.

I have already transferred the ÖH fee for the winter term 2019/20 to the amount of EUR 20,20.

Place/Date

Signature of the applicant

Attachment: statement of the supervisor on PhD thesis

Innsbruck,

Signature of the Vice Rector for Teaching and Study Matters

### Von der Sachbearbeiter\*in auszufüllen:

- ☐ fristgerechte Antragsstellung
- ☐ Positive Stellungnahme der Betreuer\*in zum Fortgang der Dissertation
- ☐ es scheint keine Inanspruchnahme von Erlass- oder Rückerstattungsgründen  
gemäß § 92 UG für das betreffende Semester auf.

Datum: \_\_\_\_\_

Sachbearbeiter\*in: \_\_\_\_\_

The Vice-Rector for Teaching and Study Matters makes the decision on the exemption in accordance with the above criteria. There is no  
legal claim for exemption from the payment of the tuition fee.