

Studierendensekretariat (Germans)
or
International Admissions and Services (Internationals)
Sedanstraße 6



Application for Registration

Summer Semester _____ Winter Semester _____

Personal Data

Last Name: _____ First Name: _____

Date of Birth: _____

Place of Birth: _____

Nationality: _____

Sex: Male Female Not Specified

Address

Street: _____ No. _____

Postal Code: _____ City: _____

Private Email Address: _____

Business Email Address: _____

Telephone Number: _____

Academic Data

Date of Acceptance as Doctoral Candidate: _____

Faculty: _____

Field of Study: _____

Please attach a copy of your letter of acceptance from your faculty to this application.

I agree to allow my data to be used for services to promote junior researchers offered by institutions of the University of Freiburg. More information can be found [here](#).

Place/Date: _____ Signature _____