

Personal Information		
	Last name	First name
	Street and street number	
	Adress supplement	
	Postal code	City
	Country	Citizenship
	Date of birth	Place of birth
Your Education	Academic degree	
	Ū.	
	Field of study	
	Specialisation	
	Specialisation	
	Please enclose a curriculum vitae with the form.	
	I hereby declare that all information is accurate and complete. I am aware of the fact that, apart from passing the aptitude test, a	
	qualification for university entr	ance is necessary for admission.
	Place and date	Signature
	We use your personal data to handle your registration at Rhine-Waal University of Applied Siences only. We do not share your information with any other company or person.	
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