**Application for enrollment / registration**

**as a cooperatively supervised doctoral student**

🞏 Application for enrollment (with semester fee and semester ticket)

🞏 Application for registration (without semester ticket, only small ID fee)

as a cooperatively supervised doctoral student for the

🞏 Summer semester, year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 Winter semester, year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Forward** all applications to the Student Services **Office via the Doctoral Advisory Office**:

HS Trier

UCB

Doctoral coordination

Trier University of Applied Sciences

Schneidershof

54293 Trier

[promotionsberatung@hochschule-trier.de](mailto:promotionsberatung@hochschule-trier.de)

0 651 / 8103 - 773

Student Services/Registrar's Office - UCB

P.O. Box 1380, 55761 Birkenfeld

[studienservice@umwelt-campus.de](mailto:studienservice@umwelt-campus.de)

06782 / 17-1826

Student Service/Registrar's Office - Idar-Oberstein

Vollmersbachstraße 53a, 55743 Idar-Oberstein

[studienservice-Io@hochschule-trier.de](mailto:studienservice-Io@hochschule-trier.de)

06781 / 9463-27

Student Service/Registrar's Office - Trier

P.O. Box 1826, 54208 Trier

[studienservice@hochschule-trier.de](mailto:studienservice@hochschule-trier.de)

0651 / 8103-335

🞏 Receipt stamp of the university

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## Basic information

### Personal data

Family name First name Birth name, if applicable

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name affixes Date of birth Place of birth

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender Nationality (specify all if more than one)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Addresses (in the case of two residential addresses, **please check the main residence**):

🞏 Postal address:

Street, house number Zip code, place of residence

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State, if outside Germany

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 Further address:

Street, house number Zip code, place of residence

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State, if outside Germany

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number (with international area code if applicable) E-mail address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Supervising professor at Trier University of Applied Sciences

Name Department

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If applicable, another supervisor at Trier University of Applied Sciences:

Name Department

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Supervising professor at the Trier University of Applied Sciences where the doctoral procedure takes place

First supervisor Name of the university

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street, house number or P.O. Box Zip code, town

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State, if outside Germany

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other supervisors outside the HS Trier, if applicable

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Start of doctorate (date of acceptance as a doctoral candidate) - please enclose certificate

Month Year

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Health insurance exists (compulsory)

🞏 Yes

## Further information

### Doctoral subject , department at the university or college with the right to award doctorates, intended title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Type of promotion

Cooperative doctorate at Trier University of Applied Sciences with (multiple selection possible):

🞏 University or higher education institution with the right to award doctorates in Germany

🞏 University or higher education institution with the right to award doctorates abroad

🞏 Non-university research institution

🞏 Economic or other institution

### Enrollment or registration at the university where the doctoral procedure takes place

🞏 Matriculation

🞏 Registration

Number (fill in if necessary): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 Neither enrollment nor registration

### Participation in a structured doctoral program

🞏 Yes 🞏 No

### Employment relationship at Trier University of Applied Sciences

🞏 Yes 🞏 No

Range

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street, house number or P.O. Box Zip code, town

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Type of university entrance qualification

Financial statements[[1]](#footnote-1) Country, district

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of graduation State (for foreign acquisition of the HZB)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First enrollment for a degree course University (First enrollment for a degree course) Subject

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Semester, year Country (if first enrollment abroad)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Previous degrees

#### 1st degree -

University State (if university abroad)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subject Semester, year (start)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of degree Overall grade

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Semester (degree) Month, year (degree)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### 2nd degree -

University State (if university abroad)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subject Semester, year (start)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of degree Overall grade

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Semester (degree) Month, year (degree)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Confirmations and process information

|  |
| --- |
| Confirmation from the main supervisor at Trier University of Applied Sciences  Mrs. / Mr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will be involved in her / his cooperative  Doctoral procedure with the working title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  supervised by me as the main supervising professor at Trier University of Applied Sciences.  Title, name Department  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Place, date Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| Declaration by the applicant  I have sickness insurance.  I am neither incapacitated nor placed under provisional guardianship.  I am aware that any false or incomplete statements made in this application may result in de-registration or revocation of enrollment.  I hereby confirm that the information I have provided is correct.  Place, date Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

### List of documents to be submitted

* Certificate of acceptance as a doctoral candidate at the university
* University registration or enrollment certificate, if available
* Completed confirmation of doctoral supervision and declaration in this form
* Completed declaration in this form
* Privacy policy enrollment of doctoral candidates
* Photograph for the ID card
* Certificate of the degree entitling you to a doctorate

Voluntary:

* Curriculum vitae

**Please do not forget to re-register for each new semester.**

**Please do not forget to notify us of the successful completion or other termination of the procedure.**

**Forms at:** [**https://www.umwelt-campus.de/forschung/forschung-am-umwelt-campus/promotionsberatung/einschreibung-rueckmeldung**](https://www.umwelt-campus.de/forschung/forschung-am-umwelt-campus/promotionsberatung/einschreibung-rueckmeldung)

## Only to be completed after the application has been processed

|  |
| --- |
| Confirmation of the semester ticket  I am aware that the chip card must be returned at the end of the semester if I do not re-register for the following semester or if I do not pay for the Deutschlandsemesterticket when I re-register for the following semester.  I have received the semester ticket:  Place, date Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| Certificate of promotion coordination It is certified that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ fulfills the requirements for registration / enrollment as a doctoral candidate at Trier University of Applied Sciences.  Place, date Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| Only to be completed by Trier University of Applied Sciences 🞏 EDP- recorded: \_\_\_\_\_\_\_\_\_\_\_\_  🞏 Certificate of enrollment  🞏 Fee amount: \_\_\_\_\_\_\_\_\_ paid 🞏 Fee not applicable  Fachbereich: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Registrierungsnummer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. List in the *information* section *and further documents* under:

   <https://www.umwelt-campus.de/forschung/forschung-am-umwelt-campus/promotionsberatung/einschreibung-rueckmeldung> [↑](#footnote-ref-1)