



Application for Funding in the Scholarship Programme *Berufliche Anerkennung in Baden-Württemberg*

Personal Details:

Last name: _____	First name: _____
Date of birth: _____	Place/country of birth: _____
Citizenship(s): _____	Time of arrival in Germany: _____
Residence status: _____	
Phone: _____	E-mail: _____

I Apply for:

<input type="checkbox"/> a scholarship: _____ € per month
I intend to participate in the following measure:
Course/exam: _____
Organisation responsible for the measure: _____
Period: _____ Hours/weeks: _____
Course/exam: _____
Organisation responsible for the measure: _____
Period: _____ Hours/weeks: _____
<input type="checkbox"/> a one-time grant for:
Course fee: _____ € Course title, responsible organisation, period: _____
Educational materials: _____ € Examination fee: _____ € Translations: _____ €
Travel expenses: _____ € Childcare: _____ € Application fee: _____ €
Other expenses: _____ € Type of expenses: _____

Motivation and Declaration of the Intention to Work:

I intend to work in the following profession in Baden-Württemberg:

I apply for a scholarship/one-time grant for the following reasons (motivation, work experience, goals, obstacles):

Have you already received confirmation for a job in the profession you desire to enter? yes no

If yes, please state the name and address of your future employer:

Details on the Professional Career:

Qualified profession: _____

Issuing date of the foreign certificate: _____ in country: _____

Work experience after acquiring the foreign certificate in years: _____

Current occupation: _____ full-time part-time
 mini-job self-employed

If you are currently not pursuing any professional activity, please mark with a cross where applicable:

- unemployed according to SGB II unemployed according to SGB III
 seeking employment according to SGB II seeking employment according to SGB III
 not registered as unemployed/seeking employment because _____

Details on the Family Status:

single married in a civil union divorced widowed

Number of dependent children in the household: _____

Among them children aged 10 years or less: _____

Details for Determining the Amount of the Monthly Scholarship
(If you apply for a one-time grant, please continue from 'Declaration of Assets')

Details on Accommodation during the Measure:

During the duration of the measure, I live with my parents/a parent.

yes no

The flat I will be living in is owned by my parents/a parent.

yes no

Details on Health and Nursing Care Insurance:

Health insurance:

included in the insurance of the parents/the spouse self-insured

Nursing care insurance:

not subject to contributions subject to contributions

Declaration of Assets at the Time of Application:

At the time of application, I have:

I. Cash assets

Cash: _____ €

II. Deposits and Accounts

Current account: _____ € Savings account: _____ € Other accounts: _____ €

III. Securities

none existing (title, current market value, currency, quantity)

Declaration of Income:

Declaration of income (gross):			
Type of income	Monthly (current)	Yearly (previous year)	Yearly (prognosis for the current year)
From existing employment relationships*			
<i>Arbeitslosengeld I</i> (unemployment benefit I - ALG I)			
<i>Arbeitslosengeld II</i> (unemployment benefit II - ALG II)			
<i>Wohngeld</i> (housing benefit)			
Pensions			
Maintenance payments (for yourself)			
Maintenance payments (for your children)			
Income from capital assets			
Income from self-employment and business activities			
If applicable, income of the spouse/civil partner			
Other (real estate, income from rental and leasing agreements, etc.)			

* If there is an existing employment relationship:
 Employer: _____
 Address: _____

Bank Account Details for the Payment of the Monthly Scholarship/One-time Grant:

Account holder: _____
IBAN: _____ BIC: _____
Bank: _____

The Following Documents Must Be Attached to the Application:

It is imperative to provide the following documents when applying for a **scholarship/one-time grant**:

- Proof of identity (copy of the identity card or the passport)
- If applicable, a copy of the residence permit, the *Duldung* (certificate of suspension of deportation) or the *Aufenthaltsgestattung* (temporary residence permit for the time of the asylum request) according to § 55 *Asylverfahrensgesetz* (Asylum Procedure Law)
- A certificate of registration or a written statement assuring that the applicant seeks employment in Baden Württemberg if the primary residence has not been in Baden-Württemberg for three months
- Proofs of the income situation if the applicant already receives other public benefits at the point of application, e.g. unemployment benefit, housing benefit, educational support, vocational training assistance
- List of planned expenditures (quote, cost estimate, information on course fees etc.)

In addition, the following documents are to be provided if the applicant applies for **funding for the recognition procedure before the issuing of a notification of assessment or a Statement of Compatibility by the ZAB**:

- Certified and translated certificates attesting professional experience and other training certificates
- Tabular curriculum vitae in German which lists all training courses and all gainful employment
- Written statement from the job centre or from the federal employment office attesting that the applicant cannot be funded from the placing budget according to § 44 SGB III
- Optional: Assessment of a recognition advice centre whether the measure would improve the long-term chances of the applicant to find employment that corresponds to their professional qualifications and of securing their own livelihood.

In addition, the following documents are to be provided if the applicant applies for **support for compensation measures or comparable measures after the issuing of a notification of assessment or a Statement of Compatibility by the ZAB**:

- Written statement from the job centre or from the federal employment office attesting that the applicant cannot be funded through a measure for activation and professional integration (§ 45 SGB III) or a measure for further vocational training (§ 81 SGB III)
- Notification from the competent authority as well as exact description of the planned compensation measure and list of the costs involved
- Optional: Assessment of a recognition advice centre whether the measure would improve the

Declaration of Consent and Commitment:

I hereby confirm that all statements above are true and complete. I have been informed that untrue or incomplete statements will lead to the loss of funding. In this case, the Baden-Württemberg Stiftung reserves the right to reclaim any funds already paid. If the details provided by me should change, I will immediately notify Interkulturelles Bildungszentrum Mannheim.

I am aware that the funding is granted due to my declared willingness to submit a confirmation (of participation) to Interkulturelles Bildungszentrum Mannheim after I have finished my training/qualification measure. I must immediately notify Interkulturelles Bildungszentrum Mannheim of a suspension or termination of the measure.

I have been informed that there is no legal claim to receive funding from the scholarship programme *Berufliche Anerkennung in Baden-Württemberg* and that this also applies to future applications if any funding has already been granted before.

I consent to the personal data provided in this application form being recorded, saved and passed on by the organisations concerned with the implementation and scientific monitoring of the scholarship programme (Baden-Württemberg Stiftung, Interkulturelles Bildungszentrum Mannheim, financial service provider, research institution) according to the provisions of the *Bundesdatenschutzgesetz* (Federal Data Protection Act).

Place, date

Signature