

APPLICATION FOR A FREE MENSA MEAL VOUCHER

For the Summer Semester 2026 / 07/01/2026-12/31/2026

INSTRUCTIONS

1

Please read the application carefully and complete it digitally or in block letters. Incomplete applications or missing supporting documents cannot be considered.

! Submission deadline: 05/31 at 11:59 PM

1. Instructions

2. Requirements

3. Personal Information

4. Personal Situation

5. Emergency Situation

6. Financial Situation

7. Declaration and Signature

8. Checklist

REQUIREMENTS

2

Please mark the requirements with Yes or No

Are you currently enrolled at Hochschule Hannover?

Yes

No

Did you already receive a free Mensa meal voucher in the last semester (Winter Semester 25/26)?

Yes

No

Is your income below the current maximum BAföG rate?

Yes

No

PERSONAL INFORMATION

3

Fields marked with * are especially important for processing.

Title

Mr. Ms. Diverse Other

Other title (optional)

Basic Information

Last name *

First name *

Degree program *

Semester *

Student ID number *

Address and Contact

Street *

House or room number *

Postal code *

City *

Mobile phone number *

Email *

PERSONAL SITUATION

4

I hold German citizenship.

Yes

No

I am married.

Yes

No

I live:

with my parents

in a shared apartment

alone

with my partner

Other

Other living situation (optional)

Additional personal information

I am an orphan or half-orphan.

Yes

No

I care for a dependent relative.

Yes

No

I am the first person in my family to attend university.

Yes

No

I have children.

Yes

No

Number of children (if yes)

I am a single parent.

Yes

No

EMERGENCY SITUATION

5

Why do you need help and why are you applying for the free Mensa meal voucher?

Applicable reasons (multiple answers possible):	
<input type="checkbox"/>	Low income
<input type="checkbox"/>	Low financial assets
<input type="checkbox"/>	Debt
<input type="checkbox"/>	Job loss
<input type="checkbox"/>	Difficulties finding a job
<input type="checkbox"/>	Physical or mental illness
	Other reasons
<input type="text"/>	

FINANCIAL SITUATION

6

Please provide supporting documents for the following information with corresponding bank statements from the last 3 months from current accounts, credit cards, Revolut or other no-fee accounts, securities accounts, investments, savings or overnight deposit accounts, and other similar accounts. The monthly expenses and income stated here must be verifiable from these documents.

Please use a monthly representation for amounts. For unclear transactions over 20 euros, please add a short explanation.

Datum	Buchungstext	Betrag EUR
12.05.2025	Kartenzahlung TIERAERZTLICHE HOCHSCHULE//Hannover	-208,46 <i>Not-OP meiner Katze</i>
17.06.2025	Überweisung online Überweisung an meine Eltern für ein neues iPad	-1.082,90

Example

Date of current financial assets

Current financial assets in euros

Please select Yes or No and complete the field directly if Yes

I have special monthly expenses (for example travel costs for caregiving or daycare).	<input type="radio"/> Yes <input type="radio"/> No	If yes: reason and amount per month in euros	<input type="text"/>
I receive income from social or voluntary work (for example committee work).	<input type="radio"/> Yes <input type="radio"/> No	If yes: type of activity and amount per month in euros	<input type="text"/>
I receive BAföG.	<input type="radio"/> Yes <input type="radio"/> No	If yes: waiting time for the BAföG decision in months	<input type="text"/>

Monthly Income (€)	
BAföG	<input type="text"/>
Scholarship	<input type="text"/>
Parents, relatives	<input type="text"/>
Child benefit	<input type="text"/>
Employment, job	<input type="text"/>
Housing benefit, social assistance	<input type="text"/>
Student loan	<input type="text"/>
Blocked account	<input type="text"/>

Monthly Expenses (€)	
Warm rent	<input type="text"/>
Food, drugstore items	<input type="text"/>
Semester contribution per month	<input type="text"/>
Health insurance	<input type="text"/>
Broadcasting fee per month	<input type="text"/>
Monthly debt collection payments	<input type="text"/>
Phone, internet	<input type="text"/>
Blocked account	<input type="text"/>

Other income

Other expenses

Total monthly income in euros

Total monthly expenses in euros

DECLARATION AND SIGNATURE 7

The data protection policy of the student body of Hochschule Hannover applies.
 With my signature, I confirm that all information provided is complete and truthful.

Hanover, date

Signature

Please submit the following documents in full and clearly legible:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Completed application for a free Mensa meal voucher |
| <input type="checkbox"/> | Consent form for data collection |
| <input type="checkbox"/> | Bank statements from the last three months from all relevant accounts |
| <input type="checkbox"/> | Photo or scan of the valid student ID |

Note: Only complete documents can be processed.

The AStA of Hochschule Hannover reserves the right to verify the statements and information provided using suitable supporting documents. The AStA of Hochschule Hannover will not pass this data on to third parties, except lawyers and courts. (False statements may have legal consequences. Further information can be found in our privacy policy.)