

Guest Auditor Application Form

Winter semester _____

Summer semester _____

Personal details (please fill in completely) (*= voluntary information)

Surname: _____ First name: _____

Nationality: _____ Street: _____

Postal code: _____ City/town: _____

Date of birth: _____ Gender: ☐ male ☐ female
☐ other ☐ undefined

Phone number*: _____ E-mail address: _____
(information required to set up guest auditor account)

Educational background*: _____

Current occupation*: _____

Have you been a guest auditor of Hochschule Geisenheim University before? ☐ yes ☐ no

I hereby confirm that the information provided in this form is true and complete.

Place, date

Signature

I intend to visit the following courses (max. 12 SWS):

Course no.	Program (initial)	Name of the course	Amount of SWS	Name of lecturer	Signature of the lecturer

Study programs at Hochschule Geisenheim University

Study program	Initial	Study program	Initial
Viticulture and Enology	WWB	Horticulture	LGB
Beverage Technology	WGB	Landscape Architecture	LAB
Int. Wine Business (German program)	WIB	Food Safety	LSB
Int. Wine Business (English program)	IWB		

Bank details for the guest auditor fee (EUR 100):

Recipient: Hochschule Geisenheim
IBAN: DE22 5109 1500 0000 6060 90 – BIC: GENODE51RGG (Rheingauer Volksbank)
Purpose: "Gasthörerschaft" + your name

Approved by Admissions Office

Place, date

Signature

The guest auditor certificate is valid once approved and signed by the university.

The fee for guest auditors is EUR 100 per semester.

Agreement of the University

Guest Auditor Certificate

The owner of this guest auditor certificate is allowed to visit the courses stated overleaf as a guest auditor in the semester specified.

The fee of EUR 100 has been paid.

Place, date

p.p._____
Vice-President of Academic & Student Affairs
Prof. Dr. Mirjam Hey

This agreement is granted according to § 12 of the regulations governing matriculation in Hessen, dated February 24, 2010 (GVBI 2010, p 70 ff)