**Registration form for guest houses of Leipzig University**
(Click on a field or use the tab key. Press F1 for help.)

Academic Title:

Sex:

First Name:

Surname:

Place of Birth:

Date of Birth:

Nationality:

Email:

Start of Stay in Leipzig:

End of Stay in Leipzig:

Home Address

Street:

c/o-Street2-Apt.#:

Postal Code:

City:

Country:

Home University:

Home Institute:

Research Area:

Host Institute in Leipzig:

Host Chair/Professor:

Email Host Chair:

Phone Number of Work in Leipzig:

Financing:

Accompanying Partner/Family Member(s):

Name of Partner:

Name(s) and Age of Children (at the Beginning of the Stay in Leipzig):

Level of German:

Special Requirements:

 I hereby agree to receive monthly invitations for events organised for IBZ guest house residents by email.

 I would be happy to receive emails with information about events in Leipzig. (Maximum once per month)

 I consent to being contacted once by email for the purpose of an evaluation regarding various aspects of my research stay (experience with authorities, support, housing, daily life).