

ASSISTANCE REQUEST

to be completed by the incoming researcher



PERSONAL DATA

Mr. Ms. Other

Last name First name

Date of birth Nationality

Host institution Position (in Dresden)

Address of institute

Current country of residence

E-mail

German language skills advanced none



PARTNERS MOVING WITH YOU

Mr. Ms. Other

Last name First name

Date of birth Nationality

Occupation

Would your partner like to work in Germany? Yes No

Profession / comment

CHILDREN MOVING WITH YOU

First and last name	Date of birth	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

I need information on school kindergarten

ACCOMMODATION

Desired move-in date

Duration of stay (expected rental period)

Monthly rent up to including utilities EUR

Desired size in square meters (1 sqm ≈ 11 sqft)

Number of rooms

Max. commute to your institution minutes

Additional information and essential features

ADDITIONAL

Furnished (temporary / at the beginning) Built-in kitchen

Furnished (whole stay)

Date

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