Universiteit Leiden

Request for payment of financial support

Regulations on financial support for students (FOS)

Personal details

Student number:

Name, initials:

Address:

Postcode and town/city:

Telephone number:

Email address:

Date of birth:

Citizen service number (BSN):

IBAN number:

Financial support

Number of registered months of study delay:

Expected graduation date:

Have you been granted an additional year of student finance by DUO due to disability or medical issues? Y/N

Are you registered as a student at any other educational institutions, and if so, to which institution have you paid tuition fee?

I, the undersigned request payment of financial support in accordance with the 'Regulations on financial support for students' (FOS).

Date:

Signature:

Submitting this form

Send this form via email to secretariaat@sea.leidenuniv.nl.