



Integration Assistance During Your Studies

Landschaftsverband Rheinland (Department of Social Welfare) is the responsible service provider for integration assistance at universities if applicants meet all the requirements. Individuals must apply for this help. Possible forms of support include **study assistants, aids, and driving services**. It should also be noted that integration assistance is classified as social assistance and therefore the applicant's assets will be taken into account.

The Following Documents Are Required in Order to Process the Application:

- A certificate from RWTH or FH Aachen stating the extent to which assistance is provided to you.
- The examination regulations for your subject.
- A medical statement with information on the extent and impact of your disability.
- A basic application for social assistance (you can download the application online or request it from LVR by stating your name, address, and date of birth; you must outline your financial circumstances and the name and address of your parents in your request).
- Your previous academic and professional experience (if you completed vocational training after obtaining your higher education entrance qualification, please state the reason why you are unable to pursue this profession or whether this training served exclusively to obtain the qualification to study at a university of applied sciences)
- A copy of your Abitur/high school diploma.



VORSCHUB – Representation for Students With Disabilities and Chronic Illnesses

c/o AStA der RWTH Aachen
Pontwall 3
52062 Aachen
Phone: +49 241 80 93792
(Telephone only available during consultation hours)

Email: vorschub@asta.rwth-aachen.de

You can find our current consultation hours here:

www.asta.rwth-aachen.de/beratung/behinderung-chronic-illness/



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- A certificate of enrollment or other proof of admission to your course of study (if applicable, a copy of the notification from hochschulstart.de or your application there and a copy of your academic achievements there to date)
- Proof of your membership with a health insurance provider and, if available, also the notification from your care provider on your care level classification.
- If your disability was caused by an accident, please state whether it was self-inflicted or caused by a third party, since this means that claims for compensation can be made. In this case, please indicate the name of the third party involved in the accident as well as the name and reference number of their insurance provider. Please also state whether the opposing insurance company has already paid out compensation (e.g. in the form of a severance package) and attach the relevant documents.

You can find more information at the following link:

https://www.lvr.de/de/nav_main/derlvr/organisation/lvrdezernate/sozialesundintegration/berdasdezernat_5.jsp



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Vertretung für Studierende
mit Behinderung und
chronischer Erkrankung
(VORSCHUB)

RWTHAACHEN
UNIVERSITY



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