

**ZKI**

Central facility for  
communications technology  
and information processing

## Application for authorisation to use data processing systems

|  |                                  |                                    |   |
|--|----------------------------------|------------------------------------|---|
| <b>Personal Data:</b>                              |                                  |                                    |   |
| First Name :                                       |                                  | Name:                              |   |
| Registered Artist Name:                            |                                  |                                    |   |
| Academic Title :                                   |                                  |                                    |   |
| Date of Birth :                                    |                                  |                                    |   |
| Sex :  | <input type="checkbox"/> Male    | <input type="checkbox"/> Female    | <input type="checkbox"/> Other  |
| Personnel Number:                                  |                                  |                                    |   |
| Picture on HBK-Card desired:                       | <input type="checkbox"/> Yes     | <input type="checkbox"/> No        |   |
| <b>Home Address:</b>                               |                                  |                                    |   |
| Street :   |                                  |                                    |   |
| ZIP Code:  |                                  | Town:                              |   |
|  |                                  | Country:                           |   |
| Phone Number:                                      |                                  |                                    |   |
| Applicant is:                                      | <input type="checkbox"/> Student | <input type="checkbox"/> Professor | <input type="checkbox"/> Employee <input type="checkbox"/> Other/ What? |
| <b>Data for Students:</b>                          |                                  |                                    |   |
| Student Number:                                    |                                  |                                    |   |
| Study Program:                                     |                                  |                                    |   |
| Semester address (if different from home address): |                                  |                                    |   |
| Street :   |                                  |                                    |   |
| ZIP Code:  |                                  | Town:                              |   |
| Phone Number:                                      |                                  |                                    |   |
| <b>Data for employees / professors:</b>            |                                  |                                    |   |
| University Institution:                            |                                  |                                    |   |
| Busy as:   |                                  |                                    |   |
| Employment period:                                 | from                             |                                    | to  |

\_\_\_\_\_  
Place/Date

\_\_\_\_\_  
Signature (Personnel Department; Head of the institution)

Declaration of applicant:

With my signature I confirm the correctness of the personal data. I recognize the "Regulations for the Use of Information and Communication Technology of the HBK Braunschweig (luK Regulations)" and the "Regulations for the Processing of Personal Data" in the respectively valid version and will observe the ZKI guidelines.

I agree that my personal data may be stored electronically at the ZKI for administrative purposes. If there should be any changes to my personal data, I am obliged to inform you of these changes immediately.

\_\_\_\_\_  
Place / Date

\_\_\_\_\_  
Signature (applicant)