MSE
Master of Science Programme
Epidemiology

JG|U UNIVERSITÄTSmedizin. MAINZ

Institut für Medizinische Biometrie,
Epidemiologie und Informatik (IMBEI)

Institut für Medizinische Biometrie, Epidemiologie
und Informatik
Michaela Seibert
MSE Koordination
Rhabanusstr. 3, Turm A
55118 Mainz

Guest Student Registration Form

I hereby request to be registered for the below-mentioned module as a guest.

MODULE ID: _____

TYP OF MODULE:
- ☐ Basic module (2100 Euro)
- ☐ Elective module (630 Euro)
- ☐ Fees daily (117 Euro)

FAMILY NAME: _____

FIRST NAME: _____

ACADEMIC TITLE: _____

ORGANISATION: _____

STREET: _____

ZIP CODE / CITY: _____

COUNTRY: _____

TELEPHONE: _____

FAX: _____

EMAIL: _____

I acknowledge that it is my responsibility to ensure that payments (see above) are made no later than 2 weeks before the beginning of the course:

Recipient of payment: Universitätsmedizin Mainz
IBAN DE64 5535 0010 1029 1520 04
Swift BIC MALADE51WOR
Rheinhessen Sparkasse Mainz
Purpose of payment: EU-MSE-Studiengang – Kostenstelle 98244, your name, module name

Registration will be considered in the order of their arrival and are binding subject to written confirmation by the IMBEI.

_____ Date

_____ Signature