

ETH Zürich Institute of Atmospheric and Climate Science Mrs Dr. Hanna Joos CHN M 18 Universitätsstrasse 16 8092 Zürich

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## Registration as **special student** UBe D-EAPS for ☐ Autumn Semester 20....... ☐ Spring Semester 20....... or (registration possible from January onwards) (registration possible from August onwards) This form must be sent to the ETH Study Coordination Atmosphere and Climate Science by the end of the first semester week at the latest, Email address: hanna.joos@env.ethz.ch The personal information will be used for administrative purposes only and will **not** be disclosed to third parties **Title** □ Mr ☐ Ms / □ Dr Surname First name Date of birth **Nationality** Home town and canton (for CH citizens only) ☐ German ☐ French ☐ Italian **Native language** □ English □ other Correspondence language □ German English Postal address • c/o • Street, house number • Zip code, town Phone number (office hours) E-mail address I am currently registered as a master student in Climate Sciences at the University of Bern ☐ Yes My Swiss student number is: ..... (see the last page of the Swiss matriculation certificate **or** the diploma) 3 I have been registered as an auditor at ETH Zurich before ☐ Yes ☐ No

(to be completed by the Study Coordination Atmosphere and Climate and the Registrar's Office)

May 2024 (valid from August 2024 on) gl

special student UBe D-EAPS (Hst 90) Initials Study Coordination Atm. & Clim.:

Initials Registrar's Office:

Date:

Signature:

By signing below, I confirm that I have fully completed this form

Date: