

Application form / contact request for active participation in the AStA of the HSHL

I am interested in the office for: _____

- at the university location
- Lippstadt
 - Hamm
 - across locations

- Please contact me by
- mail
 - phone
 - video



My phone number and/or email: _____

Name: _____

Age: _____

Residence: _____

Course: _____

Semester: _____

I want to help shape student life at my university because:

I want to get involved in this office because:

I have the following useful knowledge / helpful experience:

