



FRIEDRICH-ALEXANDER  
UNIVERSITÄT  
ERLANGEN-NÜRNBERG

**Friedrich-Alexander-Universität  
Erlangen-Nürnberg**

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**REGISTRATION**

I would like to register for free membership of the University of Erlangen-Nürnberg Alumni Network.  
I give my agreement for the University to send me information.

**Personal Information**

Title / Academic Title: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_  
 Maiden Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 ZIP and City / Town: \_\_\_\_\_ Country: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Academic Information**

I am a

- current student  former student  
 current Faculty  former Faculty

Field of Study / Research: \_\_\_\_\_ Academic degree: \_\_\_\_\_  
 Time at the University of Erlangen-Nürnberg from \_\_\_\_\_ until \_\_\_\_\_ (year).

**Professional experience (optional information)**

Job: \_\_\_\_\_  
 Sector: \_\_\_\_\_  
 Employer: \_\_\_\_\_ Website: \_\_\_\_\_

How did you hear about the Alumni Network of the University of Erlangen-Nürnberg?

\_\_\_\_\_

I agree to allow my details to be saved in the central alumni database of the University of Erlangen-Nürnberg solely for the purposes of alumni work.

\_\_\_\_\_  
 Date, Signature