

**University of Bonn**

**Hochschulrechenzentrum  
Identity Management  
Wegelerstr. 6  
53115 Bonn**

**Investigation Request**

Name: .....  
First Name: .....  
Uni-ID: .....  
Student-No.: .....  
Telephone or e-mail in case of inquiries: .....

Institute No: ..... Stamp of the Institute:

Signature of the budget responsible: .....

Name of the institute: .....

The reply shall be sent in writing to the official address (employee) or to the private address (all others). The data is determined based on our database! For comparison, please fill in the address fields!

Street: .....

Postal Code, Place: .....

**Requested User Data:**

- Password (in this case a new password will be generated)
- Uni-ID

Please fill in the form and send it with **your signature and stamped by the institute** (employees) or a **legible black and white copy of an official photo ID** (all others) scanned to [ldm@uni-bonn.de](mailto:ldm@uni-bonn.de). **Incomplete applications will not be processed!**

Date: .....

Signature: .....