

Application for the Issuance of the fnma Certificate "OER Practitioner | OER Praktiker:in"

Herewith, the issuance of the fnma certificate "OER Practitioner | OER-Praktiker:in" is applied for by the eligible person and the responsible training supervisor jointly.

Fees

The financial support of the Austrian Federal Ministry of Education, Science and Research (BMBWF) allows for no fees to be charged until 12/2028.

Applicant (Person)

Please fill in all details carefully and completely and send the saved PDF application via email to [fnma: info@oer-zertifikat.at](mailto:info@oer-zertifikat.at)

The issuance of the fnma certificate "OER Practitioner | OER-Praktiker:in" is applied for the following person:

First name:	
Last name:	
Name of University:	
Email Address:	

Please ensure to use the official email address of the mentioned university.

Applicant's (Person) Consent to Data Protection and Data Usage

The mentioned person agrees to and confirms:

- that upon successful review, their first and last name, the name of the university, the year of issuance, and the certificate number will be published on the fnma website for OER certification;
- that fnma (until revoked) is authorized to store and process the provided data for the organization and execution of the OER certification and for the sustainable archiving of the results;
- and that fnma may use the provided email address to clarify any open questions related to this application and for any potential future re-certification.

Confirmation by the Applicant (Person)

I agree to the application and the transmission of the application and the contained data to fnma and confirm that I have the approval of the university to mention its name.

Place and Date:	
Signature:	

Information on Further Training

Name of Institution:	
Title of Training:	
ID of the Accreditation Certificate of the Training Concept:	
Completion Date of Training:	

Confirmation by the Training Supervisor

It is confirmed by the training supervisor that the mentioned person has successfully participated in further training, whose training concept was successfully accredited by the fnma advisory board for OER certification.

First and Last Name:	
Place and Date:	
Signature:	