

Please complete the application with block capitals

form for UW doctoral students

APPLICATION for the allocation of holidays

- 1. Applicant's name and surname
2. Applicant's personal identification number (PESEL)
3. Contact phone
4. Name of the unit providing doctoral studies
5. Doctoral studies start date
6. Residence address
7. E-mail address if you wish to receive the invoice by e-mail

8. I apply for a vacation at the below place and during the below period:

place period

.....

for the following persons (enter the applicant if they will also be present) provide the surname and name, degree of family relationship (spouse, child, other person), children's age:

- 1) 4)
2) 5)
3) 6)

Please complete items 6-9 if you are applying for a subsidized vacation.

- 9. Number persons sharing a common household..... (including children up to 15 years of age)
10. I am a single parent: YES NO (cross out as unnecessary)
11. I hereby confirm that the average monthly gross income per person in the family, calculated according to the rules set forth under paragraph 7 sections 6-9 of the USBF Regulations, amounts to PLN:
12. Tax Office details (code, place, street, building no., apartment no.)
13. If a child above the age of 15 is to use a subsidized vacation, please attach the certificate confirming continued school or university education.

I hereby confirm that all the data provided in the application are true to the facts.

..... (application submission date) (applicant's signature)

PAYMENT FOR VACATIONS - TO BE COMPLETED BY THE OFFICE FOR PERSONNEL SOCIAL BENEFITS

Table with 6 columns: Net unit price (accommodation, food), Number of days, Net full fee, % payment net subsidized fee, VAT tax 8%, Gross value.

Number of the invoice dated Invoice adjustment