

## DECLARATION

Regarding arrival at the University of Economics in Katowice in the period from .....  
to .....

I, the undersigned,

Name and Surname .....

Country .....

Institution.....

hereby declare that:

- 1) In the last 14 days I have had no symptoms such as fever, cough, shortness of breath, breathing problems or any other symptoms related to the suspicion of COVID-19 infection and I have had no conscious contact with an infected person;
- 2) I am aware of the risks of the coronavirus epidemic and declare that I will not make any claims against the University of Economics in Katowice resulting from the possible deterioration of my health (e.g. due to the COVID-19) nor apply for any compensation payment or provision of transport from Poland to my home country;
- 3) I have read and undertake to respect the regulations and sanitary conditions, including prevention and combating of the virus causing COVID-19 in force in Poland, as well as the requirements and guidelines in this regard set by the University of Economics in Katowice;
- 4) In the case of possible symptoms of COVID-19 such as fever cough, shortness of breath, breathing problems and other symptoms related to the suspicion of COVID-19 infection, I undertake to immediately notify of this fact by phone or e-mail the receiving unit at the University of Economics in Katowice and to immediately report to the nearest epidemiological and sanitary station.

I declare under the penalty of perjury according to the Article 233 § 1 of Law of the 6 June 1997 Poland's Penal Code (Journal of Laws of the Republic of Poland of 2020, item 1444, as amended) that the data I have provided is true.

.....  
(date)

.....  
(legible signature)