Appendix no. 4 to the Regulations for awarding benefits to the MUB students, introduced by the Rector's Order no. 88/2021 dated 23.08.2021.

Student's forename and surname

Faculty

Year of study

Programme

**STUDENT'S DECLARATION**

**Aware of the criminal liability for making a false statement, I declare the following:**

1. **I declare that I am not receiving benefits for more than from the above programme** (§93 para. 1 of the Law on Higher Education and Science),
2. **I am a graduate of the programme:**

no

yes (if answered positively, please fill in the table below)

| **Graduate:** | **Name of the university** | **Programme** | **Year of graduation** |
| --- | --- | --- | --- |
| **of the first-degree studies** |  |  |  |
| **of the second-degree studies** |  |  |  |
| **of the uniform Master studies or equivalent studies** |  |  |  |

1. **I am/was a student of another programme. I declare that since graduating from secondary school I have been studying at university (including another university**

no

yes (if answered positively, please fill in the table below)

|  |  |  |
| --- | --- | --- |
| **Name of the university** | **programme** | **day, month and year of study (from – to)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Date of emergence of disability** (to be completed by a student applying for a grant for disabled persons):

**Date and student's legible signature:**