

Date of submission of application signature of the University employee.....

APPLICATION FOR GRANTING BENEFITS IN THE FORM OF

- Maintenance grant
- Increase of the maintenance grant

I, hereby, declare that before completing this application I have thoroughly read the "Regulations of benefits for students of the Wrocław Business Academy " and the Information Clause constituting Annex 5 to the aforementioned Regulations of benefits for students of the the Wrocław Business Academy.

.....
Place, date

.....
applicant's signature

PART A - TO BE COMPLETED BY THE STUDENT.**I. Details of the person applying for the scholarship (please fill in block letters)**

| | | | |
|--|-------|--|---------------------------------|
| name and surname | | | Pesel number/personal ID number |
| System of studies Stationary / extramural 1st cycle/ 2nd cycle | Major | Year of study 24/25 I / II / III / IV | Register No. |
| Miejsce stałego zameldowania | | | Citizenship: |
| Adres korespondencyjny studenta | | | Mobile phone |
| e-mail | | | |

II. Data on family members (including children under 26 receiving education)

| Relationship status | Name and surname | Date of birth | Place of employment (company name) Place of education (school) | Date of conclusion of the contract Year of study |
|---------------------|------------------|---------------|---|---|
| 1. Applicant | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

| | | | | |
|----|--|--|--|--|
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |

III. Student statements:

Being aware of the criminal liability for giving false testimony originating from Art. 233 of the Act of June 6, 1997 Penal Code (Journal of Laws of 2016, item 189, as amended) (Art. 233 § 1. *Who, when submitting a testimony to be used as evidence in court proceedings or in other proceedings on the basis of the act, testifies untruthfully or conceals the truth, is subjected to punishment by imprisonment from 6 months to 8 years.*) I submit the following statements:

| Statements*: | YES | NO |
|--|-----|----|
| 1. I am a financially independent student (I meet the conditions of § 13 item 2 of the Regulations on Material Assistance) and I do not run a household with my parents, therefore I do not present their income as well as my the income of my siblings'. If the student enters YES, they must attach documents confirming financial independence and submit a declaration of financial independence (Appendix 4), if the student is unable to prove financial independence, presenting also the income of his parents and siblings - enter NO. | | |
| 2. I, hereby, declare that I have read the Regulations regarding student benefits. I also declare that when determining the amount of income of all of my family members, no type of income was omitted, which should be taken into account when determining my financial situation (YES = was not omitted). | | |
| 3. There is no person among my family members, living in an institution that provides round-the-clock maintenance. If such a person exists - please tick NO (the above statement is not true); the student is then obliged to attach a written explanation of the situation: name and surname of the family member staying in the above-mentioned institution, institution name, period of stay, type of relationship; such a person cannot be included in the family composition . | | |
| 4. I possess a master's degree, master's degree in engineering or an equivalent degree | | |
| 5. I possess the professional title of bachelor, engineer or equivalent (applies to first-cycle students) | | |
| 6. I am a candidate for a professional soldier or a professional soldier who has taken up studies on the basis of a referral by a competent military authority and I have received help in connection with studying under the provisions regarding military service of professional soldiers | | |
| 7. I am an officer of state services in the candidate service or a state service officer who has started studies on the basis of a referral by a competent military authority and I have received help in connection with studying under the provisions regarding military service of professional soldiers. | | |

.....
Date and legible student's signature

* należy zaznaczyć odpowiednio TAK lub NIE

I declare that I have been/started higher education since graduation:

| Studies - 1st cycle - 2nd cycle - long cycle studies | Name of the University | Major | semester of study from ... to... | Date of completion |
|---|------------------------|-------|----------------------------------|--------------------|
| | | | | |
| | | | | |
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| | | | | |

Previous period of education (number of semesters) - add up all semesters started.

Being aware of the responsibility for providing false data, including disciplinary liability and the obligation to return unlawfully collected funds, as well as criminal liability originated from Art. 233 of the Criminal Code, I declare that all the above-mentioned information is true.

.....
Date and legible student's signature

APPLICATION FOR AN INCREASE OF THE MAINTENANCE GRANT

1. I, hereby, declare that the distance from my place of permanent residence - registration, submitted to the seat of the University is km, and the travel time would take approx. hours, therefore everyday commuting to the University would make it almost impossible / difficult * for me to study, which makes it necessary for me to live in a room / flat * in Wroclaw / or its vicinity.

2. Other reasons justifying obtaining the right to a maintenance grant in an increased amount:

A document confirming the above-mentioned condition should be attached.

.....
student's signature

* delete where inapplicable

I attach the following documents to the application:*

| | |
|--|---|
| <input type="checkbox"/> Tax office - taxable income | certificate of income taxable with personal income tax on general terms for 2022, issued by the competent tax office |
| <input type="checkbox"/> Tax office - untaxed income | certificate of income not subject to taxation with personal income tax on general principles for 2022, issued by the competent tax office |
| <input type="checkbox"/> Tax office - lump sum | a certificate from the Tax Office on the amount of the flat-rate income tax due for 2022 |

| | |
|---|---|
| <input type="checkbox"/> ZUS - certificate | Certificate from the Social Insurance Institution confirming the full amount of the premium for health insurance, i.e. the sum of the premium deducted from tax and deducted from income in 2022. |
| <input type="checkbox"/> Tax Office - business activity | Certificate from the tax office containing information on: the form of tax paid, the amount of income, the tax rate, the amount of tax paid in 2022. |
| <input type="checkbox"/> Declaration - untaxed income | Statement on the amount of income obtained in 2022 not subject to income tax (Appendix 2) |
| <input type="checkbox"/> Statement - farm | Declaration of owned conversion hectares (Annex 3) |
| <input type="checkbox"/> Statement - household | Statement on not running a shared household with parents (Appendix 4) |
| <input type="checkbox"/> Certificate - Commune Office | Certificate from the competent authority of the municipality on the size of the farm in 2022 expressed in conversion hectares |
| <input type="checkbox"/> Business deregistration | Abstract from the business activity register |
| <input type="checkbox"/> Labour Office | Certificate from the Employment Office, confirming the status of an unemployed person, together with information on the amount of the allowance (net) for. |
| <input type="checkbox"/> Court order / court settlement | A photocopy of the court judgment or court settlement with the stated amount of maintenance. |
| <input type="checkbox"/> Bailiff | Certificate from the bailiff on the ineffectiveness of the bailiff's enforcement of the adjudicated maintenance. |
| <input type="checkbox"/> Employment certificate | Employment certificate or other document confirming the loss of job (including the date) |
| <input type="checkbox"/> Certificate from the employer | A certificate from the employer on employment, detailing the date of employment and the amount of remuneration for the first full month of work..... |
| <input type="checkbox"/> ZUS decision to grant | Decision of the Social Insurance Institution on granting a pension, retirement pension, survivor's pension |
| <input type="checkbox"/> ZUS decision on loss | Decision of the Social Insurance Institution on the loss of the right to a pension, retirement pension, survivor's pension for..... |
| <input type="checkbox"/> Birth certificate | Photocopy of the birth certificate..... |
| <input type="checkbox"/> Marriage certificate | Photocopy of the marriage certificate..... |
| <input type="checkbox"/> Death certificate | Copy of death certificate..... |
| <input type="checkbox"/> Certificate of study | Certificate of education..... |
| <input type="checkbox"/> Photocopy of ID card | Photocopy of the applicant's ID card and..... |
| <input type="checkbox"/> Certificate from MOPS | Certificate from MOPS on the income and property situation of the family with an income below PLN 600.00 . |
| <input type="checkbox"/> Others | |

* please tick the relevant documents attached to the application

