Please complete the application in block letters

**form for UW pensioners
and disability pensioners**

SUBSIDY APPLICATION

 **- for an organised holiday booked with other institution
 - for a privately arranged holiday**

1. Applicant's name and surname ....

2. Applicant's PESEL no. [Personal Identification Number] or personal no. in SAP ....

3. Telephone ....

4. I apply for a subsidy for the following eligible persons (enter the applicant's name if they are the one, who applies for the subsidy):

 1. ....

 2. ....

 3. ....

When applying for a subsidy for a privately arranged holiday, please provide the details of the eligible persons: name, surname, degree of kinship, child's date of birth and attach the following documents:

 — in the case of children above the age of 15: an **original certificate** confirming the fact that they continue their education at school or at a full-time first-cycle, second-cycle or long-cycle, or a **certified true copy of a certificate** from an institution authorised to declare the degree of disability,

 — an original invoice/receipt issued by the entity authorised to organise the recreational activities, which includes the names and surnames of the persons benefiting from the holiday, the unit price of the holiday stay for each person listed and the dates of the stay.

5. Number of persons in a household ....

6. I am a single parent: **YES NO (delete as appropriate)**

7. I hereby confirm that the average monthly gross income per family member, calculated according to the principles set out in § 7, sections 6–9 of the University Social Benefits Fund Rules and Regulations, amounts to PLN:………………………………………………………………….. .

8. I would like to receive the benefit: (choose the appropriate option)

 ☐ **BY TRANSFER TO THE PERSONAL BANK ACCOUNT NO.** ....
 ☐ **IN CASH TO BE COLLECTED FROM A MI LLENNIUM BANK BRANCH**
 ☐ **BY POSTAL TRANSFER TO THE INDICATED ADDRESS: (please complete if appropriate only)**

 ....
 (postal code) (place)
 ....
 (street, building no., apartment no.)

I hereby confirm that the above data are accurate and complete.

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

To be completed by the Office for Personnel Social Benefits

Subsidy for an organised holiday **Subsidy for a privately arranged holiday**

from the price of PLN .... x ....% **in the amount of .... persons x PLN ....**

= PLN ....