

Note: the English version of this document is for information purposes only

Please complete the application in block letters

form for UW pensioners/disability pensioners

**APPLICATION
for a holiday allocation**

1. Applicant's name and surname*
2. Applicant's PESEL no. [Personal Identification Number] or personal no. in SAP *
3. Telephone*
4. Email address*
5. I hereby apply for a holiday allocation in the following place and period:

Place: **ŁUKĘCIN / SZELIGÓWKA / WRZOS**

Period: from to

for the following persons **(ENTER THE APPLICANT, IF HE/SHE IS ALSO GOING TO THAT PLACE)** provide name and surname, degree of kinship (spouse, child, other person), age of the child*:

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

Number of persons in a household *.....including child/children under the age of 15..... , child/children continuing their education up to the age of 25:, child's/children disability certificate: **YES NO**

6. I am a single or a single parent*: **YES NO**
7. I hereby declare that the average gross monthly income per family member, calculated in accordance with the principles set out in § 7, sections 6-9 of the University Social Benefits Fund Rules and Regulations is:
PLN.....
8. Have you been allocated a holiday in "ŁUKĘCIN" during the last 3 years.* **YES NO**
if the answer is "YES", please indicate the year: 2022 2023 2024

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

.....
(application submission date)

.....
(applicant's signature)

