

Appendix No. 4 to the Regulations for benefits for WUT students in the academic year 2022/2023

Application no		Academic year	2022/2023
Date of submission	____/____/20____		
Signature of the receiving person			

To be completed by dean's office or scholarship committee

Faculty Scholarship Committee

Application for Social Scholarship

#N/D	#N/D		
Surname	Names		
Student record book number	PESEL		
Address			
City	Post code	Citizenship	
Street	Building number	Flat	
E-mail address	Phone	Studies:	
Cycle of study:	Semester	Field of study	
Bank account number			

I am applying for:

Social scholarship:  Increased social scholarship

Justification for receiving an increased social scholarship:

Total family income is: 0 zł, divided into 12 months and number of family members:

Monthly income per person in the family amounts to: **#DZIEL/0!**

I am a financially independent student and do not live in a shared household with my parents or parent.

I declare that:

1. Total time of having student status is \_\_\_\_\_ semesters.

Within this period I received the following benefits:

1. academic year .....	Type of benefit .....
2. academic year .....	Type of benefit .....
3. academic year .....	Type of benefit .....
4. academic year .....	Type of benefit .....
5. academic year .....	Type of benefit .....
6. academic year .....	Type of benefit .....

- My financial situation is difficult.
- I am aware that I am entitled to the Rector's scholarship only in one field of study, at one university only.
- I am aware that if after completing one field of study I continue the study in another field of study, I am not entitled to the scholarship unless I continue study after completing first-cycle study to obtain the professional degree of Master or an equivalent one.
- I have become familiar with the Regulations for Benefits for Students of the Warsaw University of Technology in the academic year 2022/2023.
- Aware of the disciplinary and criminal liability for providing untrue statements, I declare that all the data provided in the application and attachments are factually correct.
- I have familiarized myself with the information on personal data processing in § 34 of the Regulations for Benefits for Students of the Warsaw University of Technology in the academic year 2022/2023 and I consent to my personal data processing under the Law of 10 May 2018 on Personal Data Processing (Journal of Laws of 2018, item 1000) and internal regulations applicable at the Warsaw University of Technology to conduct the proceedings of granting financial aid, and in the case of granting the aid – in the process of servicing the payment of benefits at the Warsaw University of Technology.

Date

Student signature

Committee comments:

Amount of social scholarship:	Amount of increase in the social scholarship:
Reasons for not granting social / increased social scholarship*:	
Date	Signature

\*) Choose as appropriate

Number of family members: 0			Income								
No.	Type of income	Number of months in which income was received	Taxable under general principles				Lump-sum	Non-taxable			Total per person monthly
			Gross	Social insurance contribution	Health insurance contribution	Tax due	Net	Income from agricultural farm	Child support	Other	
1	Name and surname:						Degree of kinship: student			Date of birth:	0
2	Name and surname:						Degree of kinship: student			Date of birth:	0
3	Name and surname:						Degree of kinship: student			Date of birth:	0
4	Name and surname:						Degree of kinship:			Date of birth:	0
5	Name and surname:						Degree of kinship:			Date of birth:	0
6	Name and surname:						Degree of kinship:			Date of birth:	0
7	Name and surname:						Degree of kinship:			Date of birth:	0
8	Name and surname:						Degree of kinship:			Date of birth:	0
9	Name and surname:						Degree of kinship:			Date of birth:	0
10	Name and surname:						Degree of kinship:			Date of birth:	0
11	Name and surname:						Degree of kinship:			Date of birth:	0
12	Name and surname:						Degree of kinship:			Date of birth:	0
13	Name and surname:						Degree of kinship:			Date of birth:	0
14	Name and surname:						Degree of kinship:			Date of birth:	0
15	Name and surname:						Degree of kinship:			Date of birth:	0

**DOCUMENTS**

Originals or certified copies of documents confirming the situation described shall be attached to the application, according to the list in Chapter IV of Regulations for Benefits for Students at the Warsaw University of Technology in the academic year 2022/2023.

Documents shall be numbered and signed by the applying student.

Please enter the numbers of attached documents, name and short description of their content below.

No.	Attachment
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	

\_\_\_\_\_ Date

\_\_\_\_\_ Student signature

\*) Choose as appropriate