*Travel Declaration Statement – JU contractors, i.e. those employed under contract of mandate or a specific work contract
or those who are project investigators or project team members*

……………………………………..…………………. Kraków, *(Date)* ………………………

*(Name and Surname)*

………………………………………………………….

*(JU unit)*

**TRAVEL DECLARATION STATEMENT**

I, *(Name and Surname)* …………………………………. the undersigned, hereby consent to undertake, at my own request, an **international trip** to ………………..………........................ *(Country, City, Institution)* on the days ……………...............…….. in order to .……………...............…….. . I acknowledge that I am fully aware of the SARS-CoV-2 infection risk and the COVID-19 disease risk pertaining to my travel. I accept in full the responsibility and liability for any loss or health damage that may be incurred.

Furthermore, I declare that I have read the current recommendations of the Polish Ministry of Foreign Affairs, the Polish Ministry of Health, the Polish Ministry of Science and Higher Education and the Chief Sanitary Inspectorate in Poland. I also confirm to follow the latest statements released by the World Health Organization and the European Centre for Disease Prevention and Control regarding travelling both, to the destination and transit countries and I abide by these recommendations.

I am fully aware of the fact that as a contractor of the Jagiellonian University (under contract of mandate or a specific work contract/being a project investigator/being a project team member\*, I am obliged to have an individual travel insurance covering basic medical insurance and accident/casualty insurance for the entire ongoing trip abroad.

(Legible signature)…………………………………………….

(Date) ……………………………………………....................

 \*delete as appropriate