



# POLITECHNIKA GDAŃSKA

## APPLICATION TO INCLUDE EARNED INCOME IN THE FAMILY INCOME (Appendix to the maintenance scholarship)

APPLICATION NUMBER:.....

APPLICANT			
Name and surname:		Album number:	

### EARNED INCOME (before establishing the right to financial assistance benefits in a given academic year) Please establish eligibility for a maintenance scholarship including the income earned by

..... due to (select as appropriate):  
*Name and surname of the person who earned the income*

- ending the childcare leave;
- obtaining unemployment benefit or scholarship;
- obtaining employment or other paid occupation;
- obtaining pre-retirement benefits, teachers' compensatory benefit, as well as old-age pension or disability pension, survivor's pension, social pension or parental supplementary benefit referred to in the Act on the Supplementary Parental Benefit;
- starting a non-agricultural business activity or resuming the activity after suspension within the meaning of Art. 16b of the Act on the Social Insurance for Farmers or Art. 36aa(1) of the Act on the Social Insurance System,
- obtaining sickness benefit, rehabilitation benefit or maternity benefit, payable after losing employment or other paid work;
- obtaining family benefit;
- obtaining maternity allowance referred to in the provisions on social insurance for farmers;
- obtaining doctoral scholarship specified in Art. 209(1) and (7) of the Act

#### Additional information:

(select as appropriate)

- base year income, number of months of earning the income in the base year .....(provide number of months)
- income earned after the end of the base year.

#### Information:

If the income was earned **in the base year**, one should attach to the application a document specifying the **net income** of the family member **and the number of months** in which the income was earned.

If the income was earned **after the base year**, one should attach to the application a document specifying the **net income** of the family member **in the month following the month** in which the income was earned.

I declare that I have read the Benefit Rules for students of Gdańsk University of Technology.

Warned of criminal liability for the crime of extorting undue financial benefits (art. 286 KK) I declare that the data provided herein are complete and consistent with the facts. I declare that I was warned of the disciplinary consequences I will be subject to if it turns out that I received social benefits based on false data, up to and including expulsion from the university, irrespective of the civil law consequences, and illegally received benefits along with statutory interest will be reimbursed.

I read the information clause for students, stipulated in §136 of the Rules.

**I HAVE READ AND ACKNOWLEDGED THE INSTRUCTION HEREIN**

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DATE

SIGNATURE OF THE APPLICANT