Acceptance and Assumption of Liability Form

To the CAI of the Department To International Cooperation Unit (pdf attached to <u>cooperations@unipi.it</u>)

| I, the un | dersigned | | | | | | | |
|--|---------------------------------|--------------|-----------|---------------|-----------|----------------|----------|-------------|
| Born in _ | | | on | l | Uni | versity ID num | ıber | |
| Enrolled | in the BA/MS D | egree Prog | ramme | in | | | | |
| selected in the "Call for financial grants for mobility at partner universities for the issue of | | | | | | | | |
| double d | legrees - year 20 | 024" with a | a grant f | financial gro | ss amoun | t of 5.000,00 | euro, | |
| | | | | | | | | |
| | | | | Declare | | | | |
| • to ac | cept the said gr | ant | | | | | | |
| • to have no other mobility grants of the University of Pisa for the same purpose | | | | | | | | |
| tick the applicable box | | | | | | | | |
| $\hfill\Box$ to have not benefited from similar financial support/ Erasmus grant in the two previous | | | | | | | | |
| academi | c years | | | | | | | |
| □ to h | ave benefited fr | om similar | financi | al support/ | Erasmus g | rant in the tw | o previo | us academic |
| years | | | | | | | | |
| Undertake | | | | | | | | |
| • to | promptly | write | to | notify | the | intention | to | waive |
| | | | | | | | | |
| • to si | ubmit to the | relevant (| CAI the | complete | table "L | earning Agree | ement-A | fter the |
| - | ", after the mo ution refund | bility, with | in and i | no later tha | n 60 days | form return, | under pe | enalty of |
| COLLLIDE | icion retund | | | | | | | |
| • to fu | ılly refund the ation | contribution | on in th | ne event of | failure | to obtain the | double | or joint |
| | | | | | | | | |
| | | | | | | | | |
| Date and | d signature | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |