Acceptance and Assumption of Liability Form

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

I, the undersigned						
Born in	on		Uni	iversity ID num	ber	
Enrolled in the BA/MS/SC Degree F	Programn	ne in				
selected in the "Call for financ	ial subs	idies/grant	s for CF	U/ECTS acquis	sition abr	oad at
partner universities for the issue	e of dou	ıble or joi	nt degree	es - year 202	3" with a	grant
financial gross amount of 5.000,00	euro,					
		Declare				
• to accept the said grant						
• to have no other mobility grant	s of the	University	of Pisa fo	r the same pur	pose	
tick the applicable box						
$\hfill\Box$ to have not benefited from si	milar fin	ancial sup	port/ Eras	smus grant in	the two p	revious
academic years						
$\hfill\Box$ to have benefited from similar	financia	al support/	Erasmus g	rant in the two	o previous	academ
years						
		Undertak	e			
• to promptly write	to	notify	the	intention	to	waive
• to submit to the relevant (CAI the	complete	table "l	earning Agree	ement-Aft	er the
Mobility", after the mobility, with contribution refund	nin and n	o later tha	ın 60 days	form return,	under pen	alty of
• to fully refund the contributi qualification	on in th	e event o	f failure	to obtain the	double o	r joint
Date and signature						