



(barcode)

**APPLICATION FOR RECALCULATION OF INCOME
FOR THE ACADEMIC YEAR/.....**

First name and surname:	Field of study:
Student ID number:	Profile of studies:
Telephone number:	Year of studies:
Level of studies:	Mode of studies:
University e-mail address of the applicant:	
Permanent address of the applicant:	
Correspondence address (if different from the above):	

I request a recalculation of the income declared in my application for the social allowance due to a change in the monthly income per family member resulting from:

- ☐ a change in the composition of the family;
☐ a change in the income of a family member (loss of income or gain of income);
☐ other.

Description of the circumstances:

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.....
.....

Being aware of the criminal, civil and disciplinary liability for providing false information, I declare that all information contained in this application and the attached documents is true and accurate.

I request that the awarded allowance be transferred to my bank account.

Date and student's signature

I declare that I have read the Rules for Awarding Allowances to Poznan University of Technology Students (Rector's Ordinance No. 27 of 23 September 2024).

Date and student's signature

Information on the processing of personal data is available at: <https://put.poznan.pl/ochrona-danych-osobowych>.

I acknowledge that information regarding this application, including any request to supplement the submitted documentation, will be communicated via the eStudent/USOSweb system.

Date and student's signature