**DECLARATION**

**ON CIRCUMSTANCES AFFECTING THE RIGHT TO ALLOWANCES**

**AND OTHER ENTITLEMENTS IN CONNECTION WITH FOREIGN BUSINESS TRAVEL**

1. First name(s): …………………………… ……………………..…….
2. Surname: …………………………………..….……………………..
3. UMK/NCU delegating unit (to which I report): …………………..
4. My status at UMK/NCU:

employee  doctoral student  student  project contractor

1. Destination country of foreign travel: ………………………………..…
2. Foreign destination city (where the purpose of the trip was carried out): …………………………………
3. Purpose of the trip (in general): ………………………………………….
4. Departure from Poland took place:

by land (crossing the Polish border)

on: …………………..….………. at: ……………….

by air (departure from the last airport in Poland)

on: …………………..….………. at: ……………….

by sea (departure of the ship/ferry from the last Polish port)

on: …………………..….………. at: ……………….

1. The return to Poland took place:

by land (crossing the Polish border)

on: …………………..….………. at: ……………….

by air (aircraft landing at the first airport in Poland)

on: …………………..….………. at: ……………….

by sea (ship/ferry entering the first Polish port)

on: …………………..….………. at: ……………….

1. The above dates cover my private stay, which lasted ….…… (number) day/days, i.e. from …..…..………... to …..……..………
2. During the trip, meals were provided free of charge and/or included in the price of bills submitted for settlement:

breakfasts: …………………... (number)

lunches: …………………..…..(number)

dinners: ………………………(number)

1. Number of nights spent abroad in accommodation facilities (i.e. excluding nights spent in means of transport): ………………..
2. The night spent in means of transport took place:

from ………………………….…….. to ………………………..……………

from ………………………….…….. to ……………………..………………

1. The bill for accommodation submitted for settlement concerns ………………… (number of nights) used by ………………. (number) person(s).
2. I incurred accommodation costs for ………………………(number) nights, i.e. from ………………….. to ……………………., but I am not submitting any bill and request that the applicable lump sum be calculated.
3. I was provided with free accommodation from ……………(date) to …………… (date), i.e. ………………………… (number) nights.
4. I incurred travel expenses on the first and last day of my stay in ………………..………….. (name of town) where I stayed:  one way /  both ways /  not applicable.
5. In addition to the travel costs listed above, I also incurred the costs of daily local transport from ……………….. (date) to ………………… (date), i.e.………………….. (number) days and a travel allowance  covers the costs incurred /  does not cover the costs incurred /  not applicable.
6. I travelled by private car  as a driver /  as a passenger /  not applicable.
7. Please refund the costs incurred to my bank account number: …………………………………………………………………………………… (IBAN + SWIFT/BIC code – applies to currencies other than PLN) – the account is held in the currency  PLN /  EUR /  USD /  other, i.e. ……………….. and accepts bank wire transfers in the specified currency without bank currency conversion.
8. I received an advance payment for the trip:  yes /  no /  I did not request it /  not applicable.
9. Other information affecting the right to allowances and lump sums regulated by the Ministry's regulation on business trips abroad: …………………………………………………………………………………………
10. I declare that I waive my right to per diems for the period from ……………………… (date) to ……………………… (date).
11. I declare that I waive my right to a lump sum for travel expenses for the period from ……….…………… (date) to ………………………… (date).

In a situation where, after my return, the costs of the trip have increased due to expenses not planned in the „Travel abroad application form”, I will request the administrator of funds to increase the trip limit and make an additional reservation of funds in the electronic reservation system.

I request that the trip be settled up to the amount indicated in the electronic fund reservation system.

I declare that the above information is true. I have been informed that the University of Nicolaus Copernicus in Toruń may verify the data contained in this declaration. I acknowledge that if any false information is found, I will be held administratively and disciplinarily liable and will return any unduly received allowances and lump sums.

……………..…………………………………………………….

Date and signature