



Opole, (date) .....

.....  
(student's full name)

.....  
(contact phone number)

**DECLARATION OF THE STUDENT OF THE UNIVERSITY OF OPOLE  
regarding the familiarisation with  
Rules of the Internship Office and the organisation of obligatory student internships**

I, the undersigned ..... residing at

.....,  
student of the University of Opole, hereby declare that before commencing the internship I have familiarised myself with the contents of the **Rules of the Internship Office and the organisation of obligatory student internships** at the University of Opole, which I confirm with my own handwritten signature.

.....  
(student's legible signature)