ATTACHMENT No. 5

to Recruitment Rules to the Doctoral School under the name “Joint Doctoral School

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(candidate’s name and surname)

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(candidate’s ID number)

**Statement**

I declare that there are no contraindications for me to undertake training at the "Joint Doctoral School", including training involving harmful factors.

I also declare that in the event of any contraindications to training at the "Joint Doctoral School" revealed during the medical examination conducted on behalf of the Coordinating Unit during the first year of training, I shall immediately resign from training at this Doctoral School.

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 (date and signature of the candidate)