

INTERNATIONAL MOBILITY WAIVER FROM LIABILITY

I, the undersigned,born in..... (...) on
student ID..... Italian tax identification number selected for an international
mobility place in a.y. 2020/21 within the programme.....declare, on my own responsibility, that:

- a. I read the document 'FAQs – COVID-19 consequences on outgoing student mobility' available on the University of Padua's website at <https://www.unipd.it/en/faq-covid19-mobility-out> and I am aware of the University of Padua's provisions on international mobility 2020/2021;
- b. I read the University of Padua's web pages on my mobility programme (<https://www.unipd.it/en/erasmus-and-other-exchange-programmes>) and I am informed and aware of the necessary steps to take to have the mobility period and credits recognised
- c. I am aware that the mobility is subject to acceptance by the partner institution and that such acceptance or conditions could be subject to change according to how the health emergency evolves;
- d. I will keep myself up to date with and observe both national and regional rules on prevention and management of COVID-19 emergency; I also read and accepted the conditions set forth by the receiving country for people coming from Italy (or from the country they currently live in) and for people returning to Italy from the host country, such as quarantine, restrictions, etc.;
- e. I will strictly adhere to the regulations in place at the partner institution, including the ones concerning COVID-19 containment measures; I read and accepted the terms of the services delivered at the receiving University/Institution, such as how on-line teaching is carried out, any lack of access to basic services, e.g. university accommodations and canteens, any obligation to take out additional insurance, etc.;
- f. I am aware of the inconvenience and risks, besides the health-related ones, that may arise from the COVID-19 emergency, by way of example but not limited to: quarantine, transport, accommodation, restrictions on access to the receiving University/Institution facilities, issuance of visas - if required by the receiving country - and others;
- g. I formally undertake, if I take out a private insurance policy, to check the terms concerning the COVID-19 emergency;
- h. I release the University of Padua from any liability for any costs borne due to the circumstances listed above and for any inconvenience concerning the mobility being interrupted/cancelled for COVID-related reasons; I am aware that additional costs resulting from health prevention measures, even if taken without notice, may be reimbursed by the relevant Italian Ministries or by the receiving countries and/or transport companies (airlines, railways, urban and suburban public transport networks).



- i. I am aware that responsibility for any risks or inconvenience that may result from the current emergency does not in any way lie with the University of Padua
- j. I decided, independently and consciously, to carry out my international mobility period.

DATE AND PLACE.....

SIGNATURE.....