

DECLARATION AND RELEASE FORM

Students undertaking an international mobility programme

I, the undersigned	
(name/surname)	
Student ID number	
Tax code	
Enrolled in the degree course	

With reference to the launch of international mobility programs for (please select):

- o Erasmus+ for Studies
- o Erasmus+ Traineeship
- o Bilateral Agreements Mobility (Extra-EU destinations or Italy)
- o Freemover Mobility

declare under my own responsibility

- a) that I take part in the above mobility for motivated educational/training requirements;
- b) that I am aware of and accept the possible risks connected to the spread of the SARS-CoV-2 infection during my activity abroad, even in the case of a possible worsening of the epidemiological situation (e.g., lockdown, quarantine, restrictions on travel as well as on the access to the facilities of the host university/institution and on obtaining a visa if required by the country of destination);

- c) that I am aware that mobility is in any case subject to acceptance by the Partner Institution and that the acceptance or the conditions thereof may be subject to change according to the evolution of the emergency situation;
- d) that I have checked the current regulations and safety protocols of the Host Institution and the Host Country, with particular reference to the possible internal subdivision into specific epidemiological risk zones, thus relieving the Free University of Bozen/Bolzano from any responsibility concerning the consequences of a possible SARS-CoV-2 contagion;
- e) that I am aware that no refund will be made and that I must therefore bear any additional cost deriving from a possible worsening of the epidemiological situation and from the sanitary measures, which the competent Italian Authorities or the country of destination and/or the transport carriers (airlines, railways, urban and extra-urban public transport) might adopt according to such situation, even if without prior notice; I therefore relieve the Free University of Bozen/Bolzano from all expenses not provided for in the health coverage detailed under letter k) below (biological damage, permanent damage from Covid-19, travel of family members in an emergency case, repatriation, etc.);
- f) that I am staying informed and I am complying to the rules for the prevention and management of the Covid-19 emergency; specifically, that I have read and accepted and that I scrupulously follow the provisions issued by the partner institution in the country of destination for those arriving from Italy (or the country of current residence), as well as those in force in Italy for people returning from the host country (e.g. quarantine, possible restrictions and other more specific health measures), as reported on the portal https://infocovid.viaggiaresicuri.it/index_en.html;
- g) that I have registered my trip on the portal of the Ministry of Foreign Affairs and International Cooperation: https://www.dovesiamonelmondo.it/dovemondo/scuole; I undertake to inform the diplomatic-consular missions of my stay and of the duration and reason thereof and to provide my address abroad;
- h) that I have read and accepted the conditions for the provision of services at the university/institution of destination, such as the methods for carrying out online teaching, possible lack of access to basic services such as university accommodation and canteens, a possible obligation to take out supplementary insurance cover and Covid-19 vaccination;
- i) that I am aware that the Covid-19 vaccination reduces the risk of contagion;

j) that I will get timely information, possibly before departure, about the health procedures in force in the host country, with particular reference to the SARS-CoV-2 contagion emergency;

k) that I have read the information on health care abroad for holders of the European Health Insurance Card (EHIC)⁽¹⁾ and that I have considered the option of taking out a new or supplementary health insurance policy for additional coverage, which expressly includes health care costs in the context of the Covid-19 emergency;

I) that I have considered the option of a travel insurance for cancellation or delay due to the Covid-19 emergency.

Attacn:
- Copy of a valid identity document.
DATE AND PLACE
SIGNATURE

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⁽¹⁾ The European Health Insurance Card (EHIC) allows all citizens of the European Union, Switzerland, Iceland and Norway, who are temporarily staying in another Member State, to have direct access to the health services of the host country under the same conditions the residents have (some services may be provided indirectly, i.e. by paying the relevant cost locally and obtaining reimbursement from their local health authority later on), but it does not cover some guarantees typically provided by "private" health policies, such as medical repatriation. In addition, non-EU nationals cannot use their EHIC card for medical treatment in Denmark, Iceland, Liechtenstein, Norway and Switzerland, unless they are refugees residing in an EU Member State or are covered as family members of an EU citizen (see also European Health Insurance Card - Employment, Social Affairs & Inclusion - European Commission (europa.eu))