Appendix 6 to the Regulations

……………………………………….

 /name and surname/

……………………………………….

 / organisational unit/

**DECLARATION**

Forewarned about the responsibility - § 5 par. 3 of the Regulations for the Management of the Company Social Fund Resources „In case it is found that the employee or former employee provides false information about his/her family and financial status, at the request of the Social Affairs Committee, he/she will be deprived of the right to benefit from social benefits for a period of three years.”

 I declare that I went / I will go\* on vacation organised on my own in the period from....................to............................. with the following family members:

Children:

1……………………………………………………………………………

2……………………………………………………………………………

3…………………………………………………………………………..

4…………………………………………………………………………..

5………………………………………………………………………....

…………………. …………………………

 date employee’s signature

\*underline the one that applies

Confirmation of the planned / used\* leave in the period from ............... to ........……

 …………………………..……………………

 signature of an employee from the Employee Affairs Department