

## DISCLAIMER INTERNATIONAL MOBILITY STUDENTS

*(drafted by the Working Group on Security Protocols for International Mobility of the CRUI Committee for International Affairs)*

I, the undersigned, .....

Student no. ....

Italian tax code .....

Enrolled in the degree course in .....

With reference to the start of the **international mobility** for:

- ☐ Erasmus+ Study
- ☐ Erasmus+ Traineeship
- ☐ Thesis and/or traineeship abroad
- ☐ Extra-EU mobility
- ☐ Joint or Double degree
- ☐ Exchange within the framework of interuniversity agreements
- ☐ Other type of structured mobility

### **Declare under my own responsibility that:**

- a) I am undertaking the abovesaid mobility for motivated training needs;
- b) I am aware of and assume the risks linked to the spread of SARS-CoV-2 infection during the activity abroad, even in the event of a possible worsening of the epidemiological situation (by way of example: lockdown, quarantine, restrictions on transport conditions, restrictions on access to the facilities of the host university/institution and obtaining of a visa, where required by the destination country);
- c) I am aware that mobility is in any case subject to acceptance by the Partner Institute and that acceptance or conditions may change in view of the evolving emergency situation;
- d) I have verified 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, and understand that the University of Siena shall not be held responsible for the consequences of possible SARS-CoV-2 contagion;
- e) I am aware that no reimbursement is provided and I shall therefore assume any additional costs incurred as a result of any worsening of the epidemiological situation and the consequent sanitary measures adopted, even without prior notice, by the

competent Italian authorities or those of the countries of destination and/or transportation carriers (airlines, railways, urban and extra-urban public transportation) and therefore shall not hold the University of Siena responsible for any expenses not provided for under the health insurance coverage referred to in letter k) below (biological damage, permanent damage from Covid-19, travel by family members in case of emergency, repatriation, etc.);

- f) I shall stay informed and shall observe the rules for the prevention and management of the Covid-19 emergency situation and, in particular, I have read and accept, and shall scrupulously follow, the provisions set out by the partner institution of the destination country for those arriving from Italy (or the country of current residence), as well as the provisions in force (such as any quarantine, restrictions and other specific health measures) for those returning to Italy from the host country, as reported on the portal <http://www.viaggiasesicuri.it/> ;
- g) I have complied with the requirements dictated by the Authorities of my home country and undertake to inform the diplomatic-consular representations of my presence, the duration and reason for my stay and my address abroad;
- h) I have read and accept the conditions for the provision of services at the destination university/institution, such as methods for carrying out on-line teaching, the possible lack of access to basic services such as university accommodation and canteens, the possible mandatory supplementary insurance coverage or Covid-19 vaccination (for medical students and those studying Health Professions);
- i) I understand that vaccination against Covid-19 reduces the risk of infection;
- j) I shall inform myself promptly, if possible before departure, about the health procedures in force at the Host Institution, with particular reference to the SARS-CoV-2 infection emergency;
- k) I have read the information on healthcare abroad for holders of the European Health Insurance Card (TEAM) and have considered taking out a new or supplementary healthcare policy for additional cover and which expressly includes healthcare costs within the scope of the Covid-19 emergency;
- l) I have considered travel insurance for cancellations or delays due to the Covid-19 emergency;

**I attach:**

- the Host Institution's declaration of acceptance of the incoming mobility.

DATE AND PLACE .....

SIGNED .....