

## STATEMENT

.....  
(name, last name)

.....  
(date of birth)

.....  
(country)

I certify that I enjoy full civil rights and that

I was not

I was

convicted with the legally binding court decision of willful crime or willful fiscal crime.

NOTE! Content of the statement will not affect the decision on admission to study at the Medical University of Warsaw.

.....  
(signature)