

APPLICATION FORM

For the provision of reductions for Public Transport student time based fares for the school year

I am applying for the provision of a reduction for Public Transport time based fares for the aforementioned school year: **20...../20....**

Name and surnameday, month and year of birth.....

Permanent address.....identity card number

Name and address of attended school.....

I declare that I have provided correct and truthful data, that I meet the requirements stated in par. 11, 12, 13 and 14 of Act No. 117/1995 Coll., on State Welfare Support, as amended, and that I am not a student with a permanent source of income as according to par. 10 of Act No. 117/1995 Coll., on State Welfare Support, as amended.

Date

Signature of the applicant

SCHOOL'S CONFIRMATION

We confirm that the aforementioned and signed applicant for a reduction for PT in Hradec Králové is a student enrolled in the above stated school year of our school. We are aware that by confirming untruthful data, claims for damages incurred upon the Hradec Králové Public Transport Company Inc. may be rightfully demanded from us.

Note: the school's confirmation may be substituted by a student identification card "ISIC," provided it is valid for the required period.

DateSchool stamp and signature of the responsible person.....