## Declaration of honour for special funding in the Erasmus programme

Date of birth  Duration of planned stay (from – to)  Receiving institution, country  I confirm that I have received the "Information sheet on top-ups for participants with opportunities in the Erasmus programme" and that I am aware of the application condition criteria for special funding.  I would like to apply for the following top-ups and hereby declare that I fulfil the conditions for according to the "Information sheet on top-ups for participants with fewer opportunities in the Erasmus programme", that I have the relevant evidence and that I can present this on request I would like to apply for a top-up as a student with child(ren).  Please note: Funding can only be applied for once for each accompanying child. You confirm	SIBERG.
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your signature that no other Erasmus funding has been applied for the accompanying child/children.	with
$\square$ I would like to apply for a top-up as a student with a disability.	
$\square$ I would like to apply for a top-up as a student with a chronic illness.	
$\square$ I would like to apply for a top-up as a student with a non-academic background.	
$\ \square$ I would like to apply for a top-up as a continuously employed student.	
Since multiple funding is not possible, you can choose one of the special funding options if seven criteria apply to you.	al ·
I have provided all information to the best of my knowledge and acknowledge that I will be requite repay the approved funds in part or in full to TU Bergakademie Freiberg in the event of false statements.	iired
Participant	
Place, Date Signature	

Please upload the signed document as a PDF in the Mobility online portal and keep the original with your original signature with you.