

Date \_\_\_\_\_

### Statment

I .....  
(first name and surname of the legal guardian)

Residing in .....  
(detailed residence address of the legal guardian, country)

Proving my identity with.....  
(name, the serial number of the identity document)

Hereby give my son/daughter

.....  
(first name and surname of the student)

Proving his/her identity with.....  
(name the serial number of the identity document)

permission to take up studies and sign Agreement for Providing Educational Services to Students of higher education studies at WSB Merito University in Wroclaw commencing in 2024/2025 academic year.