

To the Rector of the University of Pisa

SUBJECT: Dr. xxxx xxxxx in mobility for lab activities related to PhD studies – Declaration of compliance with safety measures against Covid-19 spread

I, the undersigned **xxxx xxxxx** as:

- Legal Representative of the University/Body/Company;
- Legal Representative of the research facility/research center of the University/Body/Company;
- Safety Manager of the University/Body/Company;
- Safety Manager of the research facility/research center of the University/Body/Company;
- delegate, acting as proxy for one of the persons above¹;

of **xxxxx** ², which will host **Dr. xxx xxx**, enrolled in the **PhD Programme in Science of drug and bioactive substances** at the University of Pisa, selected within the mobility programme/agreement **DOCTORAL RESEARCH** academic year **xxxx/xxxx** for **PhD project** to be carried out at this University/Body/Company from **xx/xx/xxxx** to **xx/xx/xxxx**

DECLARE

Dr. xxxxx xxxxx will be guaranteed the compliance with all the provisions on health and safety applied in the workplaces, as well as the safety measures against Covid-19 spread, related to the workers, sector, activity and workplace where the practical and/or lab activity is carried out for the studies of **xxxxxxxxxx**³.

A proxy is attached (only in case of Delegate)⁴.

Place and date:

University/Body/Company:

(Stamp and signature)

¹ Tick the applicable box. In the event of delegator, please annex the proxy statement.

² Please provide the name of hosting University/Body/Company and, in the event of declaration signed by legal representative or manager of the research facility/center, please indicate also the name of the research facility/center.

³ Please provide relevant details about the activity.

⁴ For declaration signed by a delegated person only.