

# Record of the student's acquaintance at VSB-TUO with the Guidelines for Ensuring Health and Safety at Work and Study.

By signing the student below, he confirms that he or she has become acquainted with the Guidelines for Ensuring Health and Safety at Work and Studies at VSB-TUO, that he or she has understood them and will follow them during his or her studies. At the same time, he gives consent to the use of his telephone number for notification by VSB-TUO in the event of an emergency.

Faculty: Mechanical Engineering

Academic year: 2025/2026

Name and surname and signature of the supervisor:

Serial nr.	Date	Name and surname	Student ID	Celphone nr.	Signature
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