

APPLICATION FOR A REFUND OF COSTS OF CAMPS/SEMI-CAMPS*

Within the framework of the Project entitled "Building structures for the integration of foreigners in Poland - stage II - piloting of Foreigners' Integration Centers" implemented by the Provincial Labor Office in Opole in partnership with the Ministry of Family and Social Policy and the Regional Center for Social Policy in Poznan, financed by the Fund for Asylum, Migration and Integration (FAMI) and the State Budget.

Name of parent/legal guardian	
Name of the child	
Name of the bank	
Bank account number of the parent/legal guardian	
Name of the camp/semi-camp organizer	
Date of realization of the camp/semi-camp*	
The price of the camp/semi-camp*	

I request payment of a refund of the costs incurred for the camp/semi-camp* in the amount of:
..... PLN, in words:

I declare that my child participated in the above-mentioned camp/semi-camp* and that the above-mentioned data are true and correct.

I attach the following documents to the application:

1. invoice/bill issued to the child's parent/legal guardian,
2. confirmation of payment (e.g. confirmation of transfer, proof of payment in cash, etc.),

.....
Place, date and signature of parent/legal guardian



Bezpieczna przystań

Projekt współfinansowany z Programu Krajowego Funduszu Azylu, Migracji i Integracji

„Budowanie struktur dla integracji cudzoziemców w Polsce – etap II – pilotaż Centrów Integracji Cudzoziemców”, w ramach Funduszu Azylu Migracji i Integracji 2014 – 2020 dla Celu szczególnego 2 Integracja / Legalna migracja (nabór nr 11-2020/BK-FAMI)

Annotation by Project staff:

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Date and signature of the employee receiving the application

I AUTHORIZE / DO NOT AUTHORIZE * for payment of the expense of the following. in the amount of
..... PLN.

.....
signature of the Project Manager

* indicate the correct