**Application for Contribution to the Interest on a Purpose Loan for Housing Needs**

First and last name:

Date of birth:

Workplace:

Requested amount of contribution       CZK

**Affidavit:**

I hereby declare that

* the submitted agreement for a purpose loan is directly related to my current or future housing
* all the submitted data are true and I will promptly report any changes made to them to the employer
* in the current calendar year I do not apply for this contribution at any other component part of the university
* By signing this request I declare that I agree that the employer will collect my personal data for the purpose of declaration and granting the reimbursement of costs for professional progress and that the employer can handle and process them for the same propose according to the provisions of law No. 110/2019 Sb. concerning  the protection of personal data, as amended.

Date:       Employee’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Required supplements:**

1) At the first application for the contribution to the interest on a purpose loan:

* copy of an agreement for a purpose loan
* copy of an extract from the ownership deed in the case of the purchase of a housing item
* copy of an agreement for the transfer of membership rights and obligations, agreement for the transfer of a business share, extract from the public register, a tenancy agreement, and others
* copy of a confirmation of a building savings bank or confirmation of a bank or a branch of a foreign bank about the amount of interest paid in the last calendar year on a purpose loan

2) For subsequent applications:

* application for a provision of contribution
* copy of a confirmation of a building savings bank or confirmation of a bank or a branch of a foreign bank about the amount of interest paid in the last calendar year on a purpose loan

**Statement by the personnel office:** [ ]  complies [ ]  does not comply

Date of commencement of employment at FSV: \_\_\_\_\_\_\_\_\_\_\_\_

Workload coefficient: \_\_\_\_\_\_\_\_\_\_

Amount of contribution: \_\_\_\_\_\_\_\_\_\_\_\_CZK

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Account office (the head of the Account Office):**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Statement by the head of the personnel department on the provision and payment of contribution:**

Contribution paid out for the month of: \_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_