



**THE SAHLGRENKA ACADEMY
INSTITUTE OF MEDICINE**

Department of
Administrator:
Telephone No:
E-mail address:

Terms and Assurance of Understanding

The scholar has been informed of the rules concerning a scholarship set up by the University of Gothenburg and acknowledges what it means to be a scholar at the University of Gothenburg.

The scholar acknowledges that:

- The scholarship is in accordance with the rules set up by the Vice-Chancellor (Dnr V 2018/1097).
- The scholarship is granted for education or other purposes and may not be paid out for any work performed for the benefit of the University.
- The scholarship is not to be considered as an employment, a scholar has no right to social benefits such as sickness compensation, parental leave, pension, vacation.
- No travel allowance will be paid to the scholar.
- Insurance for the whole period of the scholarship is settled.
- If any hindrance to use the scholarship for the intended purposes a reconsideration/reappraisal of the granted scholarship may be permitted.
- The Swedish Tax Authorities should be informed about the scholarship if applicable.

Place:
Date:

Place:
Date:

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Signature of Scholar

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Signature of Supervisor

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Printed Name

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Printed Name