**DECLARATION ON RULES FOR WORK SAFETY**

**and realization of instruction of students of the _____ year of study, group No._____, *winter/summer* term of the academic year _____/_____ at the Faculty of Pharmacy, Comenius University, Bratislava.**

I hereby declare, that on (date) _____, our teacher gave us instructions about work safety. We became acquainted with basic regulations of a safe and health-risk-free work during practical exercises due to take place during this semester.

We were also instructed about the manipulation with fire extinguishing devices, about the duties and the way of use of means and devices of personal protection, as well as about circumstances which could cause personal injury or occupational disease.

I hereby oblige myself to follow the rules of safe and health-risk-free work during every practical exercises and during other work, and to respect all imposed regulations and instructions.

We realize that disrespect for and breaking of regulations and instructions or frivolous conduct could lead to health damage of any persons taking part in the practical exercises and in such a case, the Faculty of Pharmacy of the Comenius University shall not accept any responsibility.

Names and signatures of the students:

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Course name:_____

Teacher:_____

In Bratislava, on _____