

Statement - To be completed and signed by the PhD candidate

Permission to use my personal details in relation to the personal data protection act: de Algemene Verordening Gegevensbescherming(AVG)

1. In signing this statement I give Wageningen University and Research permission to give my personal details (name, gender, date and place of birth, civil status, nationality, address abroad and in the Netherlands, V-number, BSN, phone number and email address) to the Immigration Authorities (IND), the Municipality of Wageningen, the Tax Office, the Centre for work and income, the AON insurance company, the Welcome Center Food Valley and the GGD (municipal Health Services).

Furthermore:

2. I give Wageningen University and Research permission to start the visa and residence permit application on my behalf.
3. I am prepared to cooperate in a tuberculosis examination and, if necessary, to undergo treatment for tuberculosis.
(Upon arrival in Wageningen you will receive more information about the tuberculosis test from the Municipal Health Services (GGD).

This applies only for candidates from countries with an obligation to have a TB test as a requirement to obtain a residence permit.

Please view the list of countries that are exempt from this requirement here:

<https://ind.nl/formulieren/7144.pdf>

Name:	
Place:	
Date:	
Signature:	