

AGREEMENT NO./KMU/CLINIC/2026
ON THE PERFORMANCE OF VOCATIONAL (CLINICAL) CLERKSHIP
AT AN AFFILIATED CLINIC

This **AGREEMENT ON PERFORMANCE OF VOCATIONAL (CLINICAL) CLERKSHIP** (hereinafter - "Agreement") is entered into in Katowice, Poland, on " ____ " ____ 2026 (hereinafter - "Effective Date"), between:

PRIVATE HIGHER EDUCATIONAL ESTABLISHMENT "KYIV MEDICAL UNIVERSITY", branch in Poland

(hereinafter - "University"),

represented by **Oleksandr Pokanevych**, acting as President of the Kyiv Medical University and at the same time Director of the branch in Poland, acting on the basis of the Articles of Association and Bylaws of the University, on the one hand,

a

name of the clerkship base

- (hereinafter - "Clerkship Base"),

represented by:

acting on the basis of:

on the other hand.

The University and the Clerkship Base are hereinafter collectively referred to as the "Parties", and each individually as a "Party".

In connection with the support of the Humanitarian Mission "Ukrainian Medical Education Under Fire: Health Care in Danger" of the Kyiv Medical University, in order to create safe and high-quality conditions for students' learning and lecturers' work in the Republic of Poland, the Parties have reached an agreement on the following issues:

- 1. Based on this Agreement, the University commissions and the Clerkship Base accepts to carry out the student clerkship of the student (name), faculty in the academic year**
2. Student clerkship will be conducted in accordance with the curriculum provided by the University.

3. Student clerkship will take place during the term of the Agreement, that is, from the date of signing the Agreement until

ARTICLE 1. SCOPE OF THE AGREEMENT

1.1 Under this Agreement, the University shall direct, and the Clerkship Base shall accept and conduct:

- medical clerkship
- dental clerkship
- pharmaceutical clerkship

for students and clinical residents of the University (hereinafter - "Apprentices").

1.2 The Clerkship Base shall be:

- a health care facility
- dental health care facility
- a pharmaceutical enterprise

in which the Student can acquire the necessary practical skills and professional competence.

1.3 Each Student shall complete his/her clerkship under the guidance and supervision of an employee of the University ("Clerkship Mentor") and an employee of the Clerkship Base ("Clerkship Coordinator").

1.4 The Clerkship Mentor shall be appointed by the University from among qualified academic and teaching staff.

1.5 The Clerkship Coordinator shall be appointed by the Clerkship Base from among qualified personnel.

ARTICLE 2. ORGANIZATION OF CLERKSHIP

2.1 Prior to the commencement of clerkship, the Parties shall agree on the terms and conditions and individual clerkship plans (Diary). Student internships will be held in accordance with the curriculum provided by the University. Internships are organized in accordance with European requirements, with emphasis on the development of professional competence, clinical thinking, responsibility, teamwork and ethics.

2.2 The University shall issue an official referral. The referral is made in two copies and signed by the University, the student and the representative of the Clerkship Base. One copy remains in the Clerkship Base, the other goes to the University.

2.3 The Dean and the Clerkship Coordinator shall confirm the completion of the clerkship in the clerkship Diary of each Apprentice.

2.4 The University shall ensure that Apprentices have throughout the apprenticeship period:

- valid health insurance,
- valid liability insurance.

ARTICLE 3. TERM OF THE CONTRACT

3.1 The Agreement is concluded from the date of signing of the Agreement until

3.2 The Agreement shall enter into force on the date of its signing by both Parties.

ARTICLE 4. OTHER PROVISIONS

4.1 All annexes and appendices are an integral part of this Agreement.

4.2 Amendments may be made only in writing with the consent of both Parties.

4.3 The Agreement is drawn up in two counterparts - one for each Party.

4.4 Contact persons responsible for communication:

- From the Clerkship Base: _____

- from the University:

tel.

e-mail:

ARTICLE 5. DATA OF THE PARTIES

5.1 University:

Private higher educational establishment "Kyiv Medical University", branch in Poland
120 Wroclawska Street, 41-902 Bytom

KRS: 0000993215

NIP: 2050006224

Tel/Fax: +48 452 239 662

E-mail: polishcampus@kmu.edu.ua

5.2 Clerkship base:

Name: _____

Address: _____

TAX ID / REGON: _____

Bank account number: _____

Tel: _____

E-mail: _____

5.3 In the event of a change in contact information, the Party shall inform the other Party within 5 calendar days.

SIGNATURES OF THE PARTIES

On behalf of the University:

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Oleksandr Pokanevych

President of Kyiv Medical University

Director of the branch in Poland

On behalf of the Clerkship Base:

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