



ACKNOWLEDGEMENT DECLARATION TO BE COMPILED BY ALL THE UNSTRUCTURED STAFF MEMBERS
ENABLED TO ACCESS INDUSTRIAL ENGINEERING DEPARTMENT AREAS AND LABORATORIES
WITH REFERENCE TO DIN INTERNAL REGULATION, SAFETY INSTRUCTIONS AND
INFORMATION ON PERSONAL DATA COLLECTION AND TREATMENT

I, the undersigned,
declare I have been informed on, I have understood and I will comply with:

- the Industrial Engineering Department Access Regulation;
- the Access Regulation of the Laboratory/Area:
- the Safety Instructions and Rules specifically related to the Laboratories and Areas I must access to and the activities I am involved with.

I declare I have been informed that the University of Bologna badge I received is strictly personal, that it is not transferable to other people and that it can be used only to enter DIN Laboratories and Areas under restricted access control, following already mentioned DIN internal Regulations.

According to the EU Regulation 2016/679 "on the protection of natural persons with regard to the processing of personal data and on the free movement of such data", I also authorize the use of my personal data for the purposes and with the methods, as specified in the *Privacy policy and Legal Notes* web page of the University of Bologna web site (<https://www.unibo.it/en/university/privacy-policy-and-legal-notes/privacy-policy/personal-data-processing>).

For women:

I declare I have been informed that I must communicate as soon as possible a pregnancy condition. This communication must be sent in written to the Responsible of the activity I carry out, and to the University of Bologna Health and Safety Office (e-mails are accepted).

In case of activities with exposure to Electro-Magnetic Fields (EMFs) (to be evaluated together with the Responsible of the activity) – YES NO (check the case)

I declare I have been informed that I must communicate as soon as possible to the responsible of the activity I am involved with and to the Medical Supervisor for DIN activities following conditions, if any, which are considered as critical in case of exposure to EMFs:

1. I have been implanted with an Active Implanted Medical Device (AIMD), like cardiac stimulators, cardiac defibrillators, cochlear implants, brain stem implants, inner ear prosthesis, neurostimulators, retinal encoders, pumps for drug infusion;
2. I have been implanted with medical devices containing metal parts (e.g. joint prostheses, nails, plates, screws, surgical clips, aneurysm clips, stents, heart valve prostheses, annuloplasty rings, metal contraceptive implants, etc);
3. I have been implanted with external medical devices (e.g. external pumps for infusion of hormones);
4. pregnancy;
5. pathologies which can alter the excitability of the central nervous system;
6. arrhythmias or pathologies regarding the heart, the hemodynamics and/or other organs or systems, which may cause the onset of arrhythmias.

Bologna/Forlì,

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signature