**Semester: chool year:** **Dept. of Control Engineering   
 Laboratory of no:……**......

**Instruction for Local Safety Rules**

**By my signature below, I confirm that I have been instructed on all terms and conditions of the safety work rules in the laboratory and I have fully understood them. I will also closely follow the oral and written instructions provided by the instructor, and the Czech legal codes for safety work described by the regulation NV 194/2022 Sb., and the standard ČSN EN 50110-1 ED.3** (*Electrical work and service*)**.**

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|  | **Instructed students** | | | | |
|  | Surname andGiven Name | **Passport** | **Login name**  *without server* | **Datum** | **Signature** |
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**Instructions given by** - Surname and Given Name:Ing.Richard Šusta, Ph.D. Signature:......................