



APPLICATION FORM FOR INCOMING ERASMUS+ STUDENTS

No _____

Please complete in BLOCK CAPITAL LETTERS and return to:
Andrzej Frycz Modrzewski Krakow University - International Office
ul. Gustawa Herlinga-Grudzińskiego 1, 30-705 Kraków, Poland

1. PERSONAL DETAILS:

Family name: _____

First name: _____

Date of birth: ____/____/____
 day month year

Address: _____

Nationality: _____

Citizenship: _____

Tel.: _____

E-mail: _____

2. KNOWLEDGE OF FOREIGN LANGUAGES:

(specify the foreign languages you know and the level of proficiency: A1, A2, B1, B2, C1, C2)

a) _____

b) _____

c) _____

3. ACADEMIC BACKGROUND:

Name of University: _____

Address: _____

Country: _____ Tel.: _____ Website: _____

Faculty: _____ Specialization: _____

Completed years of studies: _____

Please specify the degree for which you are enrolled: bachelor master

4. PLEASE SPECIFY THE FACULTY FOR WHICH YOU ARE APPLYING (check 1 box only):

Psychology and Humanities Security Studies Law, Administration and International Relations

Medicine and Health Sciences Architecture and Fine Arts Management and Social Communication

5. ARRIVAL AND STAY AT ANDRZEJ FRYCZ MODRZEWSKI KRAKOW UNIVERSITY:

When are you planning to start your studies at Andrzej Frycz Modrzewski Krakow University?

Please mark appropriately: autumn semester (October) spring semester (February)

How long are you planning to study at Andrzej Frycz Modrzewski Krakow University as an Erasmus student?

Please mark appropriately: 1 semester 2 semesters

6. WHY WOULD YOU LIKE TO STUDY AT ANDRZEJ FRYCZ MODRZEWSKI KRAKOW UNIVERSITY?

Date and student's legible signature: _____

CONSENT TO THE PROCESSING OF PERSONAL DATA

Based on requirements of the General Data Protection Regulation dated 27th April 2016 (GDPR)

I agree to the processing of my personal data included in the student's questionnaire, in order to document the course of studies on the basis of the provisions of the Act dated 27th July 2005 Law on Higher Education and administrative acts, by Andrzej Frycz Modrzewski Krakow University in Krakow (with its registered seat at ul. Gustawa Herlinga-Grudzińskiego 1 in Krakow), which will be the Administrator of Personal Data.

I accept what follows:

1. providing personal data included in the student's questionnaire is voluntary;
2. I have the right to access the content of my personal data and the right to rectify it, delete it, limit its processing, the right to transfer data, the right to object, to withdraw consent at any time without affecting the legality of the processing, which was made on the basis of consent before its withdrawal; the withdrawal of consent to the processing of personal data may be sent by e-mail to the following address: iodo@afm.edu.pl;
3. I have the right to lodge a complaint with the supervisory body for the protection of personal data;
4. personal data may only be made available to other entities with appropriate authorization based on national or UE law;
5. shared personal data will not be processed in an automated manner, and will not be profiled, and will not be transferred to a third country or an international organization;
6. my personal data will be kept for the duration of the studies and the archiving period resulting from legal provisions;
7. the Inspector of Personal Data Protection supervising the correctness of personal data processing can be contacted under the following e-mail address: iodo@afm.edu.pl.

.....
Date and student's legible signature

CONSENT TO THE TRANSFERRING OF PERSONAL DATA to MPK S.A.

in order to use Electronic Student ID Cards as carriers of the Krakow City Card Programme, hereinafter referred to as the Programme

I AGREE

I DO NOT AGREE

to the transferring of my personal data by Andrzej Frycz Modrzewski Krakow University to Miejskie Przedsiębiorstwo Komunikacyjne S.A. in Krakow and their processing by Miejskie Przedsiębiorstwo Komunikacyjne S.A. in accordance with requirements of the General Data Protection Regulation dated 27th April 2016 in the extent necessary for the implementation of the Programme.

The consent to transferring personal data includes the following data necessary for the implementation of the Programme: name, surname; permanent address; student's grade book no., date of completion of (or resignation from) studies.

I further confirm that I have been informed that:

- 1) transferred personal data shall be received by Miejskie Przedsiębiorstwo Komunikacyjne S.A. with its registered seat in Krakow, at ul. Wawrzyńca 13;
- 2) agreeing to the personal data being transferred to Miejskie Przedsiębiorstwo Komunikacyjne S.A. is voluntary, however the refusal to agree shall mean lack of possibility to participate in the Programme.

.....
Date and student's legible signature

CONSENT TO THE TRANSFERRING OF PERSONAL DATA to MICROSOFT

in order to use MICROSOFT OFFICE 365 services

I AGREE

I DO NOT AGREE to use MICROSOFT OFFICE 365 services

to the transferring of my personal data by Andrzej Frycz Modrzewski Krakow University to Microsoft Polska Sp. z o.o. with its registered office in Warsaw (02-222) at ul. Aleje Jerozolimskie 195A and their processing by Microsoft Polska Sp. z o.o. with its registered office in Warsaw (02-222) at ul. Aleje Jerozolimskie 195A in accordance with requirements of the General Data Protection Regulation dated 27th April 2016 in the extent necessary for the implementation of the MICROSOFT OFFICE 365 services (including creating an e-mail account), hereinafter referred to as Services.

The consent to transferring personal data includes the following data necessary for the implementation of the Services: name, surname; student's grade book no., student's e-mail address; date of completion of (or resignation from) studies.

I further confirm that I have been informed that:

- 1) transferred personal data shall be received by Microsoft Polska Sp. z o.o. with its registered office in Warsaw (02-222) at ul. Aleje Jerozolimskie 195A;
- 2) agreeing to the personal data being transferred to Microsoft Polska Sp. z o.o. with its registered office in Warsaw (02-222) at ul. Aleje Jerozolimskie 195A is voluntary, however the refusal to agree shall mean lack of possibility to use the Services.

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Date and student's legible signature