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APPLICATION FOR A SINGLE ROOM IN THE STUDENT DORMITORY

IN THE ACADEMIC YEAR 20...../20.....

(This form is an attachment to the application for a place in the student dormitory)

Studer	nt/doctoral student's details:				
Full na	me	Index number/PESEL			
		Permanent place of residence			
Dormit	cory No granted for the academic year 20/20				
	To the Vice-Rector for Student Affair	s and Quality of Education			
		·			
	ments:				
1. 2. 3. 4. 5.	Before submitting an application, the student is required to familiarise the in the Student Dormitories in a given academic year. Aware of the disciplinary and criminal liability, I declare that all the attached docume contained in the application, are complete and correct. The Controller of your personal data is the University of Lodz with its registered office at Narutow In any case, the Data Protection Officer may be contacted at the above-mentioned address with a Your personal data will be processed for the purpose of processing the application for a place and The full data processing clause is available at: https://www.bip.uni.lodz.pl/inne/ochrona-danych.	responsibility for making a false declaration, including onts and the data contained therein, as well as the data dicza 68, 90-136 Łódź. In note: Data Protection Officer, or by e-mail at: iod@uni.lodz.pl Lliving in the student dormitories of the University of Lodz.			
Łódź, on					
		applicant's signature			
Consid	eration of the University Dormitory Admission Committee				
Date a	nd signature of the Chair of the Committee:				
Decisio	on of the Vice-Rector for Student Affairs and Quality of Edu	cation:			
		(Date and signature)			