

Łódź, on

APPLICATION FOR AN INDEPENDENT PLACE IN A DOUBLE/THREE-PERSON ROOM¹

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

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

Student/doctoral student's details:

.....
Full name

.....
Index number/PESEL

.....
Faculty, major, year

.....
Permanent place of residence

Dormitory No. granted for the academic year 20..../20.....

To the Dormitory Manager

Proszę o wyrażenie zgody na:

- one-person accommodation in a double/three-person room
- two-person accommodation with in a three-person room
(name, surname, index number)

in the academic year 20 / 20

I agree to pay the fee in accordance with the provisions of the current Rules and Regulations.

Justification:

.....
.....
.....

Attachments:

Before submitting an application, the student is required to familiarise themselves with the rules governing the allocation of places in the Student Dormitories in a given academic year. Aware of the responsibility for making a false declaration, including disciplinary and criminal liability, I declare that all the attached documents and the data contained therein, as well as the data contained in the application, are complete and correct.

1. *The Controller of your personal data is the University of Lodz with its registered office at Narutowicza 68, 90-136 Łódź.*
2. *In any case, the Data Protection Officer may be contacted at the above-mentioned address with a note: Data Protection Officer, or by e-mail at: iod@uni.lodz.pl*
3. *Your personal data will be processed for the purpose of processing the application for a place and living in the student dormitories of the University of Lodz.*
4. *The full data processing clause is available at: <https://www.bip.uni.lodz.pl/inne/ochrona-danych-osobowych/klauzule-informacyjne>.*

Łódź, on

.....
applicant's signature

DECISION OF THE DORMITORY MANAGER:

.....

(DATE AND SIGNATURE OF THE DORMITORY MANAGER)

¹ Delete as appropriate.