

TO THE SCHOLARSHIP AND SOCIAL COMMITTEE OF THE FACULTY OF

(Department / Tomaszow Mazowiecki Branch)

STUDY PROGRAMME.....

APPLICATION FOR RECALCULATION OF INCOME IN ACADEMIC YEAR 20...../20.....

APPLICANT DETAILS:

FIRST NAME LAST NAME

PERMANENT PLACE OF RESIDENCE

street, house number, apartment number, code, town

CONTACT PHONE: E-MAIL:

from the Usos university domain

PESEL STUDY YEAR: REGISTER NO.

STUDIES: - BACHELOR'S DEGREE - MASTER'S DEGREE - UNIFORM MASTER'S DEGREE - DOCTORAL DEGREE*

*mark as appropriate

I request a recalculation of the income earned by me or my family members due to:

loss of income¹ by:

(Please describe the situation - who and when lost the income? Do they have any income as of the date of application? Document with a certificate of employment or a copy of the terminated contract or a statement from the taxpayer)

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1) **obtaining income²** by:

(Please describe the situation - who and when obtained the income? Document with a copy of the contract and a net salary certificate for the month following the income)

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PREVIOUS MONTHLY INCOME <i>(to be filled in by an employee of COSSiSSiD)</i>	PLN
NET MONTHLY INCOME IN THE FAMILY AFTER RECALCULATION <i>(to be filled in by an employee of COSSiSSiD)</i>	PLN
NET MONTHLY INCOME PER FAMILY MEMBER AFTER RECALCULATION <i>(to be filled in by an employee of COSSiSSiD)</i>	PLN

¹ In accordance with Article 3(23) of the Act of 28 November 2003 on Family Benefits (i.e. Journal of Laws of 2023, item 390, as amended).

² In accordance with Article 3(24) of the Act of 28 November 2003 on Family Benefits (i.e. Journal of Laws of 2023, item 390, as amended).

DECLARATION

Being aware of the criminal liability for providing false data, I declare that:

1. The data contained in the application and attached documents are factually correct;
2. I am not applying for any of the scholarship in another study programme at the University of Lodz or another university;
3. I am not a candidate for a professional soldier, I am not a professional soldier, or a civil servant;
4. I have read and understood the Regulations of scholarship benefits for students and doctoral students of the University of Lodz;
5. Should any circumstances arise that impact the content of this statement, I commit to promptly informing the Commission in writing and consent to amending or revoking the scholarship decision as per Article 155 of the Code of Civil Procedure..

Article 233(1) of the Act of 6 June 1997, Penal Code (uniformed text Journal of Laws of 2021, item 2345 as amended). Whoever, while giving testimony intended to serve as evidence in court proceedings or other proceedings conducted under the law, testifies untruthfully or conceals the truth, shall be subject to a penalty of imprisonment from 6 months to 8 years.

Lodz, on

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(legible signature of student/doctoral student)

Information about the processing of personal data for family members of a person applying for a scholarship benefit at the University of Lodz

According to Article 14 of the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data and repealing Directive 95/46/EC (general data protection regulation), hereinafter "GDPR", we inform that:

1. The Controller of your personal data is the University of Lodz , with its registered office at ul. Narutowicza 68, 90-136 Lodz.
 2. In any case, the Data Protection Officer may be contacted at the above-mentioned mailing address with a note: Data Protection Officer, by e-mail at: iod@uni.lodz.pl
 3. Your personal data (as a member of the applicant's family) will be processed for the purpose of processing the application for scholarship benefits at the University of Lodz.
 4. Your personal data are processed:
 - 1) on the basis of established law, among others, the Law on Higher Education and Science and the University's internal regulations;
 - 2) because it is necessary for the performance of a task carried out in the public interest or in the exercise of public authority entrusted to the controller;
 5. The Controller will process the personal data categories mentioned in the University of Lodz Regulations on Scholarship Benefits for Students and Doctoral Students of the University of Lodz, including but not limited to your first name, last name, date of birth, and degree of relationship.
 6. Your personal data will be processed in the case of:
 - 1) negative review of the application for a period of 5 years, and then removed;
 - 2) successful application for a period of 5 years, and then removed;
 - 3) in cases where the application is not accepted for admission or if you choose to resign from your studies, the data will be kept for 1 year and then removed.
 7. The recipients of your personal data are those involved in the procedure related to the granting of scholarship benefits at the University of Lodz. They may also be entities authorized to obtain personal data under the law or entities to which the Controller has entrusted the processing of personal data under a contract.
 8. You are entitled to:
 - 1) access the content of your data;
 - 2) rectify your data when they are inconsistent with the real state of affairs;
 - 3) to their erasure, limitation of processing, as well as data portability - in cases provided by law;
 - 4) to object to the processing of your personal data;
 - 5) to lodge a complaint to the supervisory authority, which is the President of the Personal Data Protection Office, based in Warsaw at ul. Stawki 2.
 9. Your personal data was obtained from the person applying for the scholarship benefit at the University of Lodz.
- Data processing is based on Article 6(1)(c) and (e) of GDPR.

Applicant's statement

I confirm that I have conveyed the contents of the information requirement as stipulated in Article 14 of the GDPR, as outlined in the "Information on the processing of personal data for family members of an individual applying for scholarship benefits at the University of Lodz," to the persons whose personal data I have included in the application and its accompanying documents.

Lodz, on

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(Applicant's legible signature)

INFORMATION ON THE DOCUMENTS TO BE ATTACHED TO THE APPLICATION IS AVAILABLE AT
<https://dokumentysocialne.uni.lodz.pl/>.