

Application to Register for Individual Courses

Surname (last name): _____
Given (first) name: _____ Second (middle) name: _____
Date of Birth: (day) _____ (month) _____ (year) _____ Place of Birth (city/country): _____
Citizenship: _____ Sex: ☐ Male ☐ Female
Passport number: _____ Date of issue: (day) _____ (month) _____ (year) _____
Place of issue: _____ Issuing agency: _____

Proposed Semester(s) of Study: Autumn 2019 ☐ Spring 2020 ☐ Academic year 2019/2020 ☐

Personal Details:

Permanent Address

Postcode: _____
Telephone: _____
Fax: _____
E-mail: _____

Temporary Address (if applicable) for correspondence Between the following dates from: until:

Postcode: _____
Telephone: _____
Fax: _____

Emergency Contact:

Primary Emergency Contact

First Name: _____
Last Name: _____
Telephone: _____
Cell Phone: _____
E-mail: _____
Relationship: _____

Secondary Emergency Contact:

First Name: _____
Last Name: _____
Telephone: _____
Cell Phone: _____
E-mail: _____
Relationship: _____

Study details:

1. English proficiency level

Please choose one of the following three options:

**not applicable if only polish language is taken*

- ☐ English is my native language
☐ English is not my native language

(Please fill in your score on one of the following language tests)

TOEFL: _____
Cambridge IELTS: _____
CAE: _____
CPE: _____

- ☐ English is not my native language, but I have completed a University-level degree taught entirely in English.

2. Previous study:

Degree (expected to be) obtained: (day) _____ (month) _____ (year) _____
Major of study/title of degree: _____

University (college): _____

Title of Senior Exercise/Thesis (if applicable): _____

Average mark (grade): _____ Grade of diploma (if applicable): _____

Honours or awards: _____

Other degrees earned: _____

Please remember to include full educational details on your attached CV (résumé). Please use the Europass CV format.

Please list the titles of the courses which you would like to take at the Centre for European Studies at Jagiellonian University. (Use additional sheets if necessary)

1. _____
2. _____
3. _____
4. _____
5. _____

***Please do not forget to send this application form together with your Europass CV (résumé), a copy of previous transcripts, and official documentation of language proficiency (if applicable).**

PAYMENT OF FEES

By bank transfer to:

Acc. Name: Uniwersytet Jagielloński

Acc. No: PL 96 1030 1944 2906 2204 9999 9999

At: CITI Bank Handlowy w Warszawie S.A.

Address: ul. Senatorska 16, Warszawa 00-923

Swift Code: CITIPLPX

Title: Individual Fees for _____ (name of student)

Please fax or send a copy of the transfer to us.

Additional Information:

Please give details of how you found out about the classes for which you are applying:

- | | | | |
|---|--|---|---|
| ☐ University Website | ☐ Other Internet source | ☐ Polish Embassy | ☐ Education Fair |
| ☐ Visited the University | ☐ Scholarship/Grant Institution | | |
| ☐ Prospectus | ☐ Poster | ☐ Colleague/friend | ☐ Professor/Academic Adviser |
| ☐ Advertisement | ☐ Other (please specify) _____ | | |

The Centre for European Studies at the Jagiellonian University does not discriminate on the basis of age, gender, sexual orientation, race, national or ethnic origin, religion or political convictions.

All information on this application and appended thereto is protected by Polish data protection laws. It will not be released to any other parties than the staff and faculty of the Jagiellonian University as appropriate to their designated duties. All materials submitted with this application may be disclosed to the applicant on demand.

All information supplied by me on this application is, to the best of my knowledge, true and complete. I understand that misrepresentation is sufficient reason for denial of admission and may be considered grounds for terminating student status if such a misrepresentation is discovered at a later date. Unsigned applications will not be considered.

SIGNATURE _____ DATE _____

Please return to:

Centre for European Studies, Jagiellonian University, ul. Garbarska 7A, 31-131 Kraków, Poland

Tel/Fax: +48 (12) 429-6195 maoffice@ces.uj.edu.pl

www.ces.uj.edu.pl

INFORMACJA O PRZETWARZANIU DANYCH OSOBOWYCH na potrzeby przebiegu studiów / INFORMATION ABOUT PERSONAL DATA PROCESSING for the course of studies

Zgodnie z art. 13 rozporządzenia Parlamentu Europejskiego i Rady (UE) 2016/679 z dnia 27 kwietnia 2016 r. w sprawie ochrony osób fizycznych w związku z przetwarzaniem danych osobowych (...) („**Rozporządzenie Ogólne**”) Uniwersytet Jagielloński informuje, że:

In accordance with Article 13 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 (...) (“General Regulation”) the Jagiellonian University hereby informs that:

- I. **Administratorem** Pani/Pana danych osobowych jest Uniwersytet Jagielloński w Krakowie, ul. Gołębia 24, 31-007 Kraków.
The Jagiellonian University in Kraków, ul. Gołębia 24, 31- 007 Kraków is the personal data controller.
- II. W Uniwersytecie Jagiellońskim został powołany **Inspektor Ochrony Danych**, ul. Gołębia 24 pok. 31, adres e-mail: iod@uj.edu.pl, tel. (12) 663 12 25.
Data protection officer has been appointed at the Jagiellonian University: ul. Gołębia 24 room 31, e-mail address: iod@uj.edu.pl, phone: (+48) 12 6 63 1 2 25.
- III. Pani/Pana dane osobowe będą przetwarzane w celu dokumentacji przebiegu studiów na podstawie przepisów ustawy z dnia 27 lipca 2005 r. – Prawo o szkolnictwie wyższym oraz aktów wykonawczych do tej ustawy przez czas trwania studiów, a następnie w celach archiwalnych przez okres 50 lat.
Your personal data will be processed in relation with the documentation of your course of study in accordance with the Law on Higher Education Act of 27 July 2005 and its secondary legislation, for the duration of the programme of study, and subsequently for archiving purposes for the period of 50 years.
- IV. Odbiorcami Pani/Pana danych osobowych są: Fundacja Studentów i Absolwentów Uniwersytetu Jagiellońskiego „Bratniak” – jeżeli będzie Pani/Pan korzystać z zakwaterowania w domach studenckich, uczelnie partnerskie, na których będzie Pani/Pan chciał(a) odbywać zajęcia (uczelnie w kraju oraz za granicą np. w ramach wymian Erasmus+), Zakład Ubezpieczeń Społecznych, Narodowy Fundusz Zdrowia, Ministerstwo Nauki i Szkolnictwa Wyższego (system POL-on), Wojskowa Komenda Uzupełnień.
The following institutions will be the recipients of your personal data: JU Student and Graduate Foundation “Bratniak”—should you live in student housing, partner universities where you may choose to attend courses (other universities in Poland and abroad, e.g. as part of Erasmus+ exchange), Social Insurance Institution, National Health Fund, Ministry of Science and Higher Education (POL-on system), Army Recruiting Command.
- V. Dostęp do Pani/Pana danych posiadają upoważnieni przez administratora pracownicy i współpracownicy, którzy muszą mieć dostęp do danych, aby wykonywać swoje obowiązki.
Access to your data will be granted to employees and associates authorized by the controller, who have to access your data to fulfill their duties.
- VI. Podanie przez Panią/Pana danych osobowych jest obowiązkiem wynikającym z przepisów ustawy Prawo o szkolnictwie wyższym.
You are required to provide your personal data on the basis of the regulations of the Law on Higher Education Act.
- VII. Posiada Pani/Pan prawo do: dostępu do treści swoich danych oraz ich sprostowania i ograniczenia przetwarzania.
You have the right to access the content of your data and to its rectification, as well as to the restriction of its processing.
- VIII. Prawo do przenoszenia Pani/Pana danych realizowane jest tylko w przypadku wynikającym z art. 165 ustawy Prawo o szkolnictwie wyższym, tzn. w związku z chęcią przeniesienia z uczelni macierzystej na inną uczelnię, w tym uczelnię zagraniczną.
Your right to data portability is only realized in the situation resulting from Article 165 of the Law on Higher Education Act, i.e. if you wish to transfer from the home university to another university, including a university abroad.
- IX. Ma Pani/Pan prawo wniesienia skargi do Prezesa Urzędu Ochrony Danych Osobowych, jeżeli uzna Pani/Pan, że przetwarzanie Pani/Pana danych osobowych narusza przepisy Rozporządzenia Ogólnego.
You have the right to lodge a complaint to the President of the Office for Personal Data Protection if you consider that the processing of your personal data infringes the provisions of the General Regulation.

Potwierdzam, że zapoznałem(am) się z powyższymi informacjami i przyjmuję je do wiadomości.
I confirm that I have read the above information and accept it.