

APPLICATION FORM ERASMUS+ PROGRAMME (PL KATOWICO3)					
SENDING INSTITUTION					
OFFICIAL NAME					
OF THE SENDING INSTITUTION					
ERASMUS CODE					
OF THE SENDING INSTITUTION					
CONTACT PERSON					
PHONE (OF CONTACT PERSON)					
EMAIL (OF CONTACT PERSON)					
COORDINATOR					
EMAIL (OF COORIDNATOR)					
STUDENT NAME SURNAME EMAIL PHONE FIELD OF STUDY / ISCED CODE YEAR OF STUDY (DURING MOBILITY)				STUDENT PHOTO (OPTIONAL)	
SEMESTER OF MOBILITY	WINTER	SUI	MMER	WHOLE	
				ACADMIC YEAR	
DO YOU NEED VISA?	YES			NO	
DO YOU NEED INVITATION LETTER?	YES			NO	
Do you want to reserve	YES			NO	
A PLACE IN THE DORMITORY?					
I agree that my personal data will be processed by the Medical University of Silesia in order to recruit for the position of Erasmus+ student I am applying for. Statements					



- 1. I am aware of my responsibility for providing false information and therefore I declare with my signature that data stated in the Application form are true.
- 2. I accept below stated information arising from the information obligation according to Art. 13 of GDPR

Reaulation:

- 1) The Personal Data Controller is Medical University of Silesia in Katowice,
- 15 Poniatowskiego Street, 40-055 Katowice, tel.32 208 3600, NIP: 634-000-53-01, REGON: 000289035.
- 2) Current contact details to Data Protection Officer are available under telephone numer 32 208 36 00 or on the website www.sum.edu.pl or www.iod.sum.edu.pl.
- 3) Your personal data are processed for the purpose of recruitment and study process based on the Act of Higher Education and Science of July 20, 2018 (Journal of Law of 2018 item 1668 with further amendments) and on the grounds of consent given in the field beyond the requirements of the Act, based on Art. 6 item 1 of GDPR.
- 4) Receipients of your personal data will be employees of the Medical University of Silesia in Katowice who are entitled to process personal data. Receipients of your personal data may also be partners of SUM who provides their services particularly in the area of study process for the Medical University of Silesia or other public authorities which make legally justified request for access to personal data.
- 5) Transfer of personal data to a third country will be preceded by request for constent in requested matter.
- 6) Personal data will be store in accordance with the office instructions on the grounds of the Regulation of the Minister of Science and Higher Education of 27 September 2018 on studies (Journal of Laws 2018, item 1861).
- 7) You have the right to demand that the Medical University of Silesia give you an access to your personal data, rectify it, delete or limit processing, as well as the right to object to the processing and right to transfer personal data;
- 8) You have the right to withdraw consent at any time, without affecting the lawfulness of processing based on consent before its withdrawal;
- 9) You have the right to lodge a complaint with a supervisory authority about processing of personal data 10) Providing personal data on the base of the Regulation of the Minister of Science and Higher Education of 27 September 2018 on studies is obligatory, but necessary in recruitment and study process. The consequence of not providing personal data will be the exclusion of the candidate from the recruitment process.
- 11) Your personal data is not subject to automated decision making.

If the above given information are not fully understandable, you can obtain additional information by contact with The Data Protection Officer, his contact details are available at: http://iod.sum.edu.pl and Tel. No. 32 208 36 00.

I hereby declare that above given essence of the information obligation according to the Art. 13 of GDPR Regulations is fully comprehensible to me.

Signature of Student	Signature of Coordinator (Sending Institution)