

ERASMUS+ STUDENT APPLICATION FORM

ACADEMIC YEAR 2022/2023

DEADLINES for submission: **20th December** for spring semester

This application should be completed in **black, CAPITAL LETTERS** in order to be easily copied, faxed or e-mailed

Please, specify study period at HOST UNIVERSITY (tick ✓)	
<input type="checkbox"/>	Academic year 2022/2023 (two semesters)
<input type="checkbox"/>	Winter semester: October 2022 - February 2023 (deadline for departure)
<input type="checkbox"/>	Spring semester: February 2023 – July 2023

Please, specify the field of study at HOST UNIVERSITY (tick ✓)	
<input type="checkbox"/>	Information Technology
<input type="checkbox"/>	English Philology
<input type="checkbox"/>	International Management
<input type="checkbox"/>	Aviation Management/General Aviation
<input type="checkbox"/>	Computer Graphics

(to be completed by the student applying)

STUDENT'S PERSONAL DATA							
Name of Home University							
Family Name							
First Name (s)							
Sex (tick ✓)	<input type="checkbox"/> Female <input type="checkbox"/> Male						
Date of Birth (dd/mm/yyyy)	/ /						
Place of Birth							
Nationality							
ID number (for EU citizens) /passport number (for non-EU citizens)							
Student's permanent address	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;">Street and No.</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Postal Code and City</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Country</td> <td style="padding: 2px;"></td> </tr> </table>	Street and No.		Postal Code and City		Country	
Street and No.							
Postal Code and City							
Country							
Student's address for correspondence (if different from above)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;">Street and No.</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Postal Code and City</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Country</td> <td style="padding: 2px;"></td> </tr> </table>	Street and No.		Postal Code and City		Country	
Street and No.							
Postal Code and City							
Country							
Telephone No. / Mobile No.	/						
Student's e-mail (regularly checked!)							

ACADEMIC DETAILS		
Erasmus Coordinator at Home University	Name	
	Address	
	Telephone/fax	
	e-mail	
Field of study at Home University		
Study cycle		
Year of studies		
Have you studied abroad before? (tick ✓)		<input type="checkbox"/> Yes <input type="checkbox"/> No
If <u>yes</u> , when? at which institution?		

LANGUAGE COMPETENCE							
Mother Tongue							
Language of instruction at home institution (if different from above)							
Other languages (specify and tick ✓)	I am currently studying this language		I have sufficient knowledge to follow lectures		I would have sufficient knowledge to follow lectures if I had some extra preparation		certificates awarded (if any)
	yes	no	yes	no	yes	no	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)			
Type of work experience	Company/organisation	Dates	Country

LIST OF INSTITUTIONS WHICH WILL RECEIVE THIS APPLICATION FORM					
Institution	Country	Period of study		Duration of stay (number of months)	N° of expected ECTS credits
		from	to		
UITM	Poland			≈ 5	

Briefly state the reasons why you wish to study abroad ?

Please explain why you have chosen the UITM

Student's signature	
Place	
Date	

HOST UNIVERSITY	
We hereby acknowledge receipt of the application, the proposed learning agreement and other required candidate's documents.	
The above-mentioned student is	<input type="checkbox"/> provisionally accepted at our institution <input type="checkbox"/> not accepted at our institution
Stamp and signature of the UITM University Coordinator for Erasmus+:	
Date:	

IMPORTANT CONSENTS

Notification duty

According to art. 13 items 1 and 2 of the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27th 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, further as GDPR), you are hereby notified that:

- 1) Your personal data is administered by the University of Information Technology and Management in Rzeszów, ul. Sucharskiego 2, 35-225 Rzeszów (hereafter as "UITM").
- 2) In any matters related to data protection, the Data Protection Officer can be contacted at iod@wsiz.rzeszow.pl
- 3) Your personal data will be processed for the purposes of applying for and participating in the Erasmus+ Programme on the basis of your consent for personal data processing according to art. 6 item 1b) of GDPR.
- 4) Your personal data will be made available to other students participating in this Programme, as well as to Mentor students.
- 5) Your personal data will not be forwarded to a third country/ international organisation.
- 6) The data you made available will not be profiled.
- 7) Your personal data will be archived for a period of 5 years continuing from September 30, 2018.
- 8) You have the right of access, rectification, removal or restriction of processing your data, as well as the right of objection, the right to request cessation of data processing and transference, the right to withdraw consent at any time, and the right to lodge a complaint with the supervisory body, the President of the Personal Data Protection Office.

I hereby agree to have the University of Information Technology and Management in Rzeszów, ul. Sucharskiego 2, 35-225 Rzeszów, process my personal data given in this form for the purposes of and in a scope necessary for applying for and participating in the Erasmus+ Programme.

I hereby agree to receive to the e-mail address I indicate electronic mail messages informing me about competitions and promotional actions organised by the University of Information Technology and Management in Rzeszów, ul. Sucharskiego 2, 35-225 Rzeszów, in which I could participate.

I hereby agree to have my personal data processed according to the act of 29th August 1997 on personal data protection (Dz. U. No. 101 of 2002, item 926 with later amendments), and to have my image and personal data published for the purposes of recruitment and promotion of the University of Information Technology and Management in Rzeszów and of the Erasmus+ Programme.

.....
Student's signature

NOTE:

A completed Application Form with the following documents:

- Learning Agreement,
- scan of ID/passport,
- motivation Letter (*in English*),
- Transcript of Records obtained in previous years of study,
- ID format picture for student ID
- Signed consents

should be **e-mailed** (as *PDF* or *MSWord* file) **to:**

Ms Aldona Dzidzik
Institutional Coordinator for Erasmus+
University of Information Technology and Management in
Rzeszow
ul. Sucharskiego 2, 35 - 225 Rzeszow
POLAND

Phone: +48 17 866 12 24
E-mail: adzidzik@wsiz.edu.pl