## EU flag-Erasmus+_vect_POSuwm1APPLICATION FORM

##  STUDENT MOBILITY FOR STUDIES

## ERAMSUS+ PROGRAMME KA107 – 2020

**HIGHER EDUCATION STUDENT AND STAFF MOBILITY BETWEEN PROGRAMME AND PARTNER COUNTRIES**

*APPLICATION FORM SHOUDL BE FILLED ELECTROCINALLY, SIGNED AND STAMPED*

|  |  |
| --- | --- |
| 1. **NAME AND SURNAME**
 |  |
| 1. **STUDYING AT**

*(UNIVERSITY, FACULTY)* |   |
| 1. **CITIZENSHIP**
 |   |
| 1. **ADRESS**
 |   |
| 1. **PHONE NUMBER**
 |   |
| 1. **NUMBER OF FINISHED HIGHER EDUCATION STUDY YEARS**
 |  |
| 1. **DEGREE FOR WHICH YOU ARE CURRENTLY STUDYING**

*(BACHELOR/ENGINEER; MASTER, DOCTORAL)* |  |
| 1. **DO YOU WANT TO APPLY FOR A PLACE IN A DORMITORY?**

 (yes/no) |  |
| 1. **E-MAIL**
 |   |
| 1. **PASSPORT NUMBER**
 |   |
| 1. **DATE OF THE MOBILITY** *(FROM FIRST TILL LAST DAY OF THE MOBILITY – WITHOUT TRAVEL)*
 | **FROM** *first day of the mobility - calendar* **TILL** *last day of the mobility- calendar*  |

*I familiarized myself with the mobility regulations operating at the University of Warmia and Mazury in Olsztyn in the frame of Erasmus+ Programme for partner countries.*

|  |  |
| --- | --- |
| ***Date and signature of an applicant***.................................................................  | *Date, signature and a stamp of an**Erasmus+ Coordinator* *(FORM HOME UNIVERSITY*................................................................. |

**Consent for the processing of common personal data by University of Warmia and Mazury**

I hereby give my consent for the processing of my personal data by the University of Warmia and Mazury in Olsztyn, Michała Oczapowskiego 2, 10-719 Olsztyn, Poland, for the purpose of mobility in the frame of Erasmus+ Programme .

 *We hereby inform you that you have the right to withdraw your consent at any time by delivering a completed consent withdrawal request form to the UWM Data Protection Supervisor. The withdrawal consent form can be downloaded from:www.uwm.edu.pl/daneosobowe*.

The withdrawal of consent shall not affect the lawfulness of processing based on your consent before its withdrawal.

…………………………

*(signature)*