Appendix No 4 To Resolution No.46/2022 of 29.06.2022 Constituting Appendix No 3a to Resolution No 159/2012 of 19.09.2012

	Date:
Application	on No:
Candidate's last and first name:	•••••
Field of study	
Medical University	of Silesia in Katowice
•	Admission Committee
ricad of the Chrystoley	Training of Committee
(name a	and title)
APPLICAT	TION FORM
for admission	on to 1st year
in the academic year/ ser	mester***
Personal data:	
Last name*:	
First name*:	
Middle name*: Name and number of ID document:	
Name and number of 1D document: Name of issuing country:	
Sex*:	
Date of birth*:	
Place of birth:	
Citizenship*:	
Pole's Card*	YES / NO**
Father's name:	122,7110
Mother's name:	
Permanent residency address:	
Street*:	
ZIP code*:	
City*:	
Country*:	
Mailing address:	
Street*:	
ZIP code*:	
City*:	
Country*:	

Phone number:

Mobile*:							
E-mail ad							
Skype ID:							
Languag	ges fluency:	none	poor	good	fluent		
Polish:							
English:							
Seconda	ry school leaving cer	tificate:					
Name of	school:						
City:							
Country:							
Year of g	graduation:						
I wish to	o be evaluated in tl	ne following fi	ields of stud	ly:			
			mathem	•			
		vics					
Pi		, 100					
Followin	g documents are encl	osed to this App	olication:				
1)	original or notarized	copy of high sc	hool diploma	١,			
2)	application form (sar		•				
3)	identification docum		•	• • •			
4)							
5)							
6)	receipt of registratio	n fee payment,					
7)							
8)		•	e diploma (ap	pplies to candida	tes who apply for graduate		
9)	• •						
10)	certificate issued by certificate or diplom Poland by operation mutual educational	the Superinte na specified in of law, issued i document reco	item 1 or 8 n a country v ognition con	 in case of doo with which Republicant or a docur 	in approval of high schood cuments not recognized in plic of Poland did not sign a ment from a country with ent is not covered in it.		
	t my Application:						
directly	to the University as	s an individual	candidate				
through	the recruiting agen	cy named	••••••		uiting agency)		

I agree that all data submitted with the Apparand available on an anonymous basis.	olication Form may be fully processed for statistical purpose
By signing below, I certify that all information	tion is true.
	(readable signature)
* mandatory fields	(readable signature)

^{**} delete where inapplicable

^{***} fulfil only candidates for medical program

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 declare that I have read and understood terms and procedures of admission resolved by the Senate, binding in the academic year 2023/2024 (Resolution No 46/2022 of the Senate of the Medical University of Silesia of June 29, 2022) and I undertake to comply with the rules.
- 3. I accept below stated information arising from the information obligation according to Art. 13 of GDPR Regulation¹:
 - 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 number 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 and on the grounds of consent given in the field beyond the requirements of the Act, based on Art. 6 (1)(a) and (c) of GDPR.
 - 4) Recipients of your personal data will be employees of the Medical University of Silesia in Katowice who are entitled to process personal data. Recipients 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) Data will be kept in accordance with the principle of minimisation and adequacy for a period to be determined on the basis of generally applicable legislation in particular:
 - 5.1. Regulation of the Minister of Science and Higher Education of 27 September 2018 on studies.
 - 5.2. the Act of 14 July 1983 on National Archival Resources and Archives.
 - 6) 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.
 - 7) You have the right to lodge a complaint with a supervisory authority about processing of personal data.
 - 8) Providing personal data on the base of the Regulation of the Minister of Science and Higher Education of 27 September 2018 with further amendments 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.
 - 9) Your personal data is not subject to automated decision making.

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

¹GDPR- 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)