APPLICATION FOR CO-EDUCATIONAL/MARITAL ROOM

.....

Date of acceptance of application

	Student details	Partner details
Surname, First Name		
Index Number		
Faculty/University/workplace		
Country, City		
E-mail address		
Current Dormitory		
Children raised in Dormitory		

KOMISJA WŁAŚCIWA DS. ZAKWATEROWANIA SAMORZĄDU STUDENCKIEGO POLITECHNIKI ŁÓDZKIEJ
Al. POLITECHNIKI 3A 90-924 ŁÓDŹ
(0-42) 631-28-41

I kindly request to be granted a *co-educational/martial*[1] room for me and my partner in Dormitory of the Lodz University of Technology №..... or №..... or №..... . In case of lack of places in the above-mentioned Dormitories, I request to be *granted/not granted*[1] the above-mentioned room in any Dormitory of the Lodz University of Technology. I declare that the place granted to me will not be used by another person under the threat of losing the possibility of further accommodation in the Academic Estate and far-reaching consequences provided for in the Academic Regulations. I declare that I have familiarized myself with the Rules and Regulations of the Academic Estate of the Lodz University of Technology and fully accept its provisions.

I attach to the application:

The required documents listed in the Rules of Order of the Academic Estate of the Lodz University of Technology.

....

Date and legible signature of the Applicant

Date and legible signature of the Partner

[1] Delete as appropriate

I confirm the provision of documentation for the application:

- statement of relationship signed by each person intending to reside together;

- ……

……..……..……
Signature of the employee of the Benefits Service Section of the TUL

OPINION OF THE DORMITORY ADMINISTRATION

OPINION OF THE DORMITORY RESIDENTS' COUNCIL

DECISION OF THE COMMITTEE RESPONSIBLE FOR A ACCOMODATION OF THE TUL STUDENT GOVERMENT

Referred to accommodation in Dormitory № …….

…….
Date, Stamp and signature of the competent accommodation authority of the TUL Student Goverment

…….
Date and legible signature of the Applicant

…….
Date and legible signature of the Partner

Appendix No. 8 to Appendix 1 of Ordinance No. 41/2019
of the Rector of Lodz University of Technology dated 10 July 2019
on the implementation of personal data
protection documentation at Lodz University of Technology

Information clause and consent clause in relation to the processing of personal data concerning family members of students and doctoral students applying for accommodation or a social scholarship

We inform you that:

1. The administrator of the personal data included in the application for accommodation in a student hall of residence is Lodz University of Technology, based in Łódź, (90-924), 116 Żeromskiego Street.

2. Lodz University of Technology processes your personal data on the basis of Article 6(1)(a) of the Regulation (EU) 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 (GDPR).

3. Your personal data will only be processed for the purpose of documenting the process of granting accommodation in a student hall of residence or a scholarship and will not be shared with other recipients.

3. Provision of data is voluntary, but necessary in order to process the application and to grant accommodation in a student hall of residence or a social scholarship.

4. You have, in accordance with the GDPR: the right to access your data and to receive a copy of it; the right to rectification and completion of your data; the right to erasure of your personal data or restriction of processing only when the processing of data does not take place in order to comply with a legal obligation; the right to obtain information and the right to lodge a complaint with the President of the Personal Data Protection Office (to the address of the Personal Data Protection Office, 2 Stawki Street, 00-193 Warsaw);

I, the undersigned, consent to the processing of my personal data by the Administrator contained in the documentation provided, including the data of family members in order to carry out the procedure for granting accommodation or a social scholarship.

The Administrator informs you that this consent may be withdrawn at any time and the withdrawal of consent does not affect the lawfulness of the processing carried out on the basis of this consent before its withdrawal.

…… ……
(Date and signature of Applicant) (Date and signature of Partner)

Tłumaczenie dzięki Centrum Językowemu Politechniki Łódzkiej

Translated thanks to the Language Center of the Lodz University of Technology

Łódź. ……
Date

STATEMENT

I declare that living in a coeducational room is not against my moral principles and I agree to it of my own free will. In the event that I/my roommate decides to stop living together, I agree to move out of the coeducational room.

I declare that in the event that I or my roommate receive a negative opinion from the Estate Administration of Lodz University of Technology, the Accommodation Committee of the TUL Student GovermentŁ or the Residents Council of the inhabited Dormitory, I undertake to move out of the coeducational room.

I undertake to move out within seven days of losing my right to live in the coeducational room.

I am aware of the fact that if I move out of the coeducational room, lack of places in the dormitory may be the basis for transfer to another dormitory or even loss of place in case of lack of places in the Lodz University of Technology Academic Estate.

…….
Date and legible signature of the Applicant

…….
Date and legible signature of the Partner