Lublin, ……………………………………..

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name and Surname | | | Student Record Book Number | |
| Parents’ Names | | PESEL (Polish citizens only) | | |
| Field of Study | | | | |
| Year of Study | System of Studies\*: Full-time / Extramural | | | |
| Cycles\*: First- cycle / Second- cycle / Long-cycle Programme / Third-cycle Programme | | | | |
| Permanent Residence Address  ………………………............................................................................................................ - ……………………………………………  street number town postcode post office | | | | Telephone number,  e-mail address  ……………………………………  .……………………………….....  …………………………………… |
| Mailing address  ………………………............................................................................................................ - ……………………………………………  street number town postcode post office | | | |

**APPLICATION**

**for a place in a dormitory**

I request that for the period from ………………………….to ……………………..in the academic year……………………….

1. a place in a student house at the street\*:

**Student house of first choice:**

B. Dobrzańskiego St. (Felin District):   
 DS Broadway single room double room   
 DS Manhattan single room double room

M. Langiewicza:   
 DS Cebion single room single room with increased space double room\*\*

DS Dodek single room single room with increased space double room\*\*

DS Eskulap high standard single room\*\*  
 high standard double room \*\*

**Student house of second choice:**

B. Dobrzańskiego St. (Felin District):   
 DS Broadway single room double room   
 DS Manhattan single room double room

M. Langiewicza:   
 DS Cebion single room single room with increased space double room\*\*

DS Dodek single room single room with increased space double room\*\*

DS Eskulap high standard single room\*\*  
 high standard double room \*\*

1. Room number…………………………………………………………………………………………………………………………..
2. \*\* Name and surname of a roommat …………………………………………………………………………………………
3. Additional accommodation in the dormitory for a wife/husband/child\*\*\*………………………………..

I confirm the truthfulness of my personal data and consent to their processing by the University of Life Sciences in Lublin for purposes related to granting financial assistance, in accordance with the provisions of the Personal Data Protection Regulation 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).

…………………………………………

(Student’s signature )

\* mark as appropriate

\*\* fill in

\*\*\* delete as appropriate

**Declaration**

I, the undersigned, declare that I have read the Regulations of Student Dormitories of the University of Life Sciences in Lublin and undertake to comply with them during the period of residence in student dormitories, in particular:

1. confirming acceptance of accommodation or reporting resignation from the allocated place in the student dormitory within the specified time;

2. taking care of the condition of the room and technical installations and taking full responsibility, also financial, for any damage caused;

3. returning the room in a non-deteriorated condition;

4. taking responsibility for the parts given for common use and for the condition of the equipment in these rooms (the obligation to repair damage, the occurrence of which cannot be attributed to one person, rests in equal parts on all residents of the room);

5. pay the fees for living in the student dormitory in the amount specified in the fee table by the 15th day of each month, to the individual bank account number located in the virtual dean's office, and in the event of failure to pay the fee by the specified deadline, to pay the interest due (failure to pay the amount due by the deadline set by the Student Dormitory Office constitutes grounds for deprivation of the right to live in the student dormitory);

6. inform the Student Dormitory Office in writing about the change of the accommodation period with two weeks' notice;

7. immediately inform the Student Dormitory Office about the removal from the list of students or doctoral students, suspension of the rights of a student or doctoral student.

……………………………….. ……………………..

Place and date signature