

Student home APPLICATION FORM FOR STUDENTS

I. PERSONAL INFORMA	ATION (complete or circle acc	ordingly):
Last name		
Name		
EMŠO		
(Fulfils Student office)		
PERSONAL DATA		
Gender	1- M	2- F
Citizenship		
II. CONTACT INFORMA	ΓΙΟΝ	
Permanent address		
Temporary address		
Mobile phone number		
E-mail		
Send me post-mail to:	1- permanent address 2- temporary address 3- other:	
III. STAYING INFORMAT	TON	
I will live in a dormitory	from:	until:
tachments:		
	rtificate with transcript of record	o (for 1st year backelor atudanta)
		s (for 1 st year bachelor students) students, all master and all doctoral students)
By signing this application	n form, I undertake the respons	ibility for the correctness of the data given in this application.
Diago and date:		Cignoturo
riace and date:		Signature:

APPROVAL FOR PERSONAL DATA PROCESSING

In accordance with the Slovenian Legislation (Zakon o visokem šolstvu (Ur.l. RS, št.119/2006-UPB3, 59/2007-ZŠtip (63/2007 popr.), 15/2008 Odl. US, 64/2008, 86/2009, 62/10-ZUPJS, 34/11 Odl. US in 78/11) and the EU General Data Protection Regulation (GDPR), I, the undersigned, allow the University of Nova Gorica to use:

- recording students' requests for staying in the rooms of Lanthieri Mansion in Vipava
- conducting procedures for determining conditions and criteria for staying in the rooms of Lanthieri Mansion in Vipava

YES NO

University of Nova Gorica can use my personal and contact information for:

- preparing and concluding Residence hall contracts for staying in the rooms of Lanthieri Castle in Vipava
- fulfillment of the obligation to register and deregistration In accordance with the Slovenian Legislation
- activities of student dormitories
- state authorities and holders of public authority
- control of fulfillment of obligations due to a settlement agreement
- informing about facts relating to the stay in the rooms of Lanthieri Castle in Vipava

YES NO

Warning: you can cancel any statement from above at any time at the Student Office of the University of Nova Gorica.

Place and date: _____ Signature: _____

Send to: studentska.pisarna@ung.si