Name and surname:

Place of residence:

Phone number:

Email address:

**REQUEST FOR EXEMPTION FROM PAYMENTS FOR RETAKING COURSES**

Date:

Faculty:

Field of study:

Study type: one-tier studies / first-cycle studies / second-cycle studies / doctoral studies

Study form: full-time / part-time

Study year:

I hereby request to exempt me from full/partial\* payment for retaking courses in the summer/winter\* semester in the academic year 20\_\_\_/20\_\_\_.

\* Delete unnecessary options.

My request is justified by the following fact(s):

Yours sincerely,

(student’s/doctoral student’s handwritten signature)

**PART TO BE COMPLETED BY THE DEAN’S OFFICE EMPLOYEES:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. | The number of retaken courses: | |  | |
| 2. | The amount to be paid: | |  | |
| 3. | Previous exemptions: | |  | |
|  | | | **Previous exemptions** | |
| **Study semester** | |  | **(state amount)** | |
|  | |  | |  |
|  | | **Payment for education** | | **Payment for retaking courses** |
|  | |  | |  |

(Dean’s Office employee’s signature)

1. The amount of profit per one person in the family:
2. The amount of the social grant:
3. The amount of the grant for the disabled:
4. The amount of the Rector’s grant for students:
5. The amount of the Rector’s grant for doctoral students:

(Dean’s Office employee’s signature)

*Enclosures:*



**Information obligation accompanying the request for exemption from payments for education**

I accept that:

1. The data administrator, obliged to ensure that the processing of my personal data is carried out in accordance with the regulations, is the University of Wrocław with its seat at pl. Uniwersytecki 1, 50-137 Wrocław.
2. The data administrator has appointed a data protection officer who can be contacted by e-mail: IOD@uwr.edu.pl.
3. My personal data will be processed for the purposes of exemption from payments for education and for archival and statistical purposes. The legal basis for the processing is: the consent granted and the Law on Higher Education and Science.
4. The provision of personal data is voluntary and the possible consequences of failure to provide data are failure to consider the request for exemption from payments for education.
5. My personal data will not be disclosed to third parties, except in cases provided for by law, in particular the Law on Higher Education and Science.
6. My personal data will be kept as part of the documentation of the course of studies on the basis of the provisions of the Law on Higher Education and Science and its implementing acts for the duration of the studies and then for archival purposes for 50 years.
7. I have the right to withdraw my consent, which is the legal basis for the processing, at any time, without affecting the lawfulness of the processing that was carried out on the basis of my consent before it was withdrawn but the withdrawal of consent is tantamount to the impossibility of further participation in the request consideration process.
8. I have the right to access, rectify, delete or restrict the processing of my personal data or to object to the processing of my data as well as the right to data transfer. I am aware, however, that my rights may be restricted by specific legal provisions.
9. Decisions on my matters will not be made by automated means and personal data will not be profiled.
10. I have the right to lodge a complaint with the Chair of the Office for Personal Data Protection.

**Consent clause**

I consent to the processing by the University of Wrocław, pl. Uniwersytecki 1, 50-137 Wrocław, of my personal data contained in the request for exemption from payments for education for the purpose of exemption from payments for education and its use for archival and statistical purposes.

**Data errors**

I accept that the University of Wrocław is not responsible for incorrect data entered by the applicant in the USOS system.

I confirm the truthfulness of data contained in the application with my handwritten signature.

(handwritten signature)