



University of
LODZ

Please, complete the Form using **CAPITAL** letters

APPLICATION FORM

I would like to apply for the following studies at the University of Lodz (please fill the name of the programme):

1st choice: †

2nd choice*: †

3rd choice*: †

*You can list up to 3 study fields, in priority order, to increase your chances of enrollment at the UL (in case of rejection decision or failure of some programmes).

Personal details

Name(s):	Surname:
Maiden name:	Father's name:
	Mother's name:
Date of birth:	Place of birth:
Citizenship:	Sex (please tick): Male † <input type="checkbox"/> Female † <input type="checkbox"/>
Passport number:	Expiration date:

Home address / Current address for correspondence

Country:	City/Town:
Province:	Zip code:
Street:	House number: Flat number:
Home phone number:	Mobile number:

E-mail address:

Person to contact in case of emergency (your next kin):

Name and surname:

Address:

Telephone number:

Mobile number:

I agree to have my personal data processed for the purpose of the recruitment procedure, in accordance with the Personal Data Protection Act of 29.08.1997, No 133, position 883.

Applicant's Own Signature:

Date: