

APPLICATION FORM FOR A CANDIDATE IN THE ELECTIONS FOR EDSG AND / OR STUDENTS' PARLIAMENT

I wish to stand for the election to (select as appropriate *):

EDSG ☐

STUDENTS' PARLIAMENT ☐

* If you are a candidate for both bodies, please tick both

Name and surname	
ED/EDD	
Field of study	
Year	
Index number	
E-mail address	
Phone number	
name of the electoral list and its representative **	

** optional field

I consent to the processing of the above personal data by June 30, 2022. I provide these data voluntarily, knowing that it is necessary to conduct the elections. If in doubt, I can ask questions to the SKW (skw@wum.edu.pl) or find information at <https://uodo.gov.pl/>

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Date and signature