



VINCENT POL UNIVERSITY IN LUBLIN

ul. Choiny 2, 20-816 Lublin, Poland, tel. +48 81 740 25 04, www.vpu.edu.pl, e-mail: infoenglish@pol.edu.pl

APPLICATION FORM

I would like to apply for the **English language preparatory course** at Vincent Pol University in Lublin for the academic year 2020/2021.

OCTOBER Intake **MARCH Intake.**

1 Year English Language Preparatory Course **Start date:** **March** **October**

1 Semester English Language Preparatory Course **Start date:** **March** **October**

Summer English Language Preparatory Course **Start date:** **July**

(please, select one):

PERSONAL DETAILS: /FILL IN CAPITAL LETTERS/

FIRST NAME SURNAME

MAIDEN NAME

DATE OF BIRTH (day/month/year) PLACE OF BIRTH

PARENTS' NAME *father* *mother* NATIONALITY

ID/PASSPORT NUMBER COUNTRY OF PERMANENT RESIDENCE

VISA NUMBER RESIDENCE CARD NUMBER

PERMANENT ADDRESS

post code *town/city/province* *country*

CORRESPONDENCE ADDRESS *

post code *town/city/province* *country*

TELEPHONE NUMBER E-MAIL

**Fill in if correspondence address is different from permanent address*

I hereby certify that the above data are true and correct – under pain of criminal liability (pursuant to art. 233, 272 and 297 of the Criminal Code)

I hereby give consent for my personal data to be processed for the purposes necessary for admission process by Vincent Pol University in Lublin, ul. Choiny 2, pursuant to art. 23 section 1 item 1 of the Act of 29 August 1997 on the Protection of Personal Data (i.e. Journal of Laws of 2016, item 922) and pursuant to art.6 section1 letter a of the General Data Protection Regulation of the European Parliament and the Council (EU) of 27 April 2016 RODO (the Official Journal of the European Union of 2016 No. 119.) from the effective date of the aforementioned regulation.

Date and Candidate's signature

SECONDARY SCHOOL ATTENDED:

SCHOOL NAME

CITY/TOWN AND COUNTRY

CERTIFICATE NUMBER START DATE END DATE

COLLEGE/UNIVERSITY ATTENDED:

COLLEGE/UNIVERSITY NAME

CITY/TOWN AND COUNTRY

TYE OF DEGREE AWARDED BACHELOR MASTER NONE

PROGRAMMES/COURSES

DIPLOMA NUMBER START DATE END DATE

ENGLISH LANGUAGE SKILLS (Please, state the level of fluency in English, marking right blank)

	PROFICIENCY	ADVANCED	INTERMEDIATE	ELEMENTARY
READING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WRITING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SPEAKING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ENGLISH LANGUAGE CERTIFICATES (if any)

NAME OF TEST	GRADE/ SCORE	DATE OF EXAMINATION
<input type="text"/>	<input type="text"/>	<input type="text"/>

PERSON CONTACT IN CASE OF AN EMERGENCY

NAME

RELATIONSHIP TELEPHONE NUMBER E-MAIL

ADDRESS

DO YOU INTEND TO APPLY FOR UNIVERSITY ACCOMMODATION?

NO SINGLE ROOM DOUBLE ROOM

MAIN SOURCE OF STUDENT'S FAMILY INCOME: (select)

employment contract mandate contract business activity agriculture retirement pension/disability pension

others (specify)

CHECK LIST:

- Secondary school (maturity) certificate and secondary school transcript**, entitling to continue university-level study in country in which the diploma was issued
- Bachelor diploma and Academic transcript** (only in the case of applications for Master studies), entitling to continue Master-level study in country in which the diploma was issued
- Sworn translations into Polish or English language** of all the documents listed above
- Certificate of English Language Proficiency**
- Copy of passport** (page with personal data), a copy of a visa or of a resident card
- Health certificate** including a clause that the student is in good health
- A copy of health insurance policy**
- 1 current photographs** (35mm x 45mm, at least one colour photograph)

Financial declaration for studies:

I shall be obliged to pay for studies at Vincent Pol University in Lublin, in accordance with the conditions set in the Rules and Regulations of the University. I acknowledge that payments shall be made in advance, by 5th October (in the case of EU students), and 1-year course fee shall be paid in advance before applying for a visa (in the case of applicants for 1-year visa). In the case of payment delays the University is entitled to claim interest.

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Date and Candidate's signature