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(Place and date)

PARENT OR LEGAL GUARDIAN * CONSENT FORM

Application for an accommodation at the SGGW dorms (halls of residence)

BY A MINOR

(Please fill in with CAPITAL letters)

I give my consent for my **minor child/ a child under my parental guardianship*** to apply for accommodation at the SGGW dorms (halls of residence):

Minor's First Name and Surname (as it appears in the passport)	Date of Birth (dd-mm-yy)	Minor's ID document/passport* (serial no)

I have read and understood the Rules and Regulations of the SGGW Dorms (Halls of Residence) constituting the Annex to Ordinance 107 of the Rector of the Warsaw University of Life Sciences of 14 October 2024.

I hereby consent to collect, process and use my data to process my application for accommodation at the SGGW halls of residence. I also acknowledge that my data controller is Warsaw University of Life Sciences, with its registered office at Nowoursynowska 166, 02-787 Warszawa, and I have rights to access and correct my data. Please be informed that providing data is voluntary but necessary to process the inquiry.

Parent/ Legal Guardian*:

Name and Surname (as it appears in the passport)	Contact telephone number:	ID/passport (serial no.)	Place of permanent residence (street, house, city, postal code, country):

* delete as applicable

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Parent/ Legal guardian signature