

.....  
(unit name)

DATE..... hrs .....

building .....

Room (No).....

TEACHING COURSES .....

TEACHER'S NAME AND SURNAME .....

Support Staff (name and surname) .....

No.	STUDENT'S NAME AND SURNAME	YEAR OF STUDY	GROUP	Contact phone number / E-mail
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

**(NAMES AND SURNAMES PLEASE FILL IN BLOCK LETTERS !!!)**

Information obligation pursuant to Art. 9 section 1 lit. and and 13 sec. 1 and sec. 2 of the general regulation on the protection of personal data of 27 April 2016 on the protection of individuals with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46 / EC (hereinafter "GDPR")

- 1) The administrator of your personal data is the University of Life Sciences in Lublin with its registered office at Akademicka 13, 20- 950 Lublin
- 2) The administrator has appointed a Data Protection Officer, who can be contacted at Akademicka 13, 20-950 Lublin or at the email address: [anna.buchlinska@up.lublin.pl](mailto:anna.buchlinska@up.lublin.pl).
- 3) Your personal data is processed in order to ensure safety when conducting classes.
- 4) Personal data will be stored for a period of 6 months from the date of submission of the survey.