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|  | **UNIVERSITY OF LIFE SCIENCES IN LUBLIN**  ***UNIWERSYTET PRZYRODNICZY W LUBLINIE***  **ACCOMMODATION FORM**  **Incoming Erasmus Students**  **ACADEMIC YEAR 2019 - 2020** | C:\Users\up\Downloads\logo_ang_400.jpg |

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| **Deadlines:**  **Winter** semester and **Full academic year**:  **Summer** semester: | Application deadline: **1st June !**  Application deadline: **1st November !** |

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| Please **TYPE** in order to be easily copied or faxed. Handwritten forms **will not be accepted.** *Proszę wypełnić w formie elektronicznej.*  *Formularze wypełnione odręcznie nie będą przyjmowane.* | **PHOTOGRAPH**  (digital photo but passport photo**)** |
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| * Sending this form is **the only way to apply** for a room in one of the dormitories of the University of Life Sciences in Lublin. * Please note that this is an accommodation form (not a rental agreement). * This form is valid for university dormitories only, **not for private housing.** * You will receive confirmation within 2 months |

**PERSONAL DETAILS / *Dane osobowe***

|  |  |
| --- | --- |
| Family name / *Nazwisko* |  |
| Name(s) / *Imię/Imiona* |  |
| Sex / *Płeć* | Male *(mężczyzna)*  Female *(kobieta)* |
| Date of birth / *Data urodzenia* | /     / |
| Place of birth / *Miejsce urodzenia* |  |
| Telephone (+area code) / *Telefon* |  |
| Fax |  |
| E-mail address / *Adres e-mail* |  |
| Permanent address / *Adres zameldowania* | |
| Street + No/ *Ulica* |  |
| Zip code / *Kod pocztowy* |  |
| Town / *Miasto* |  |
| Country / *Kraj* |  |
| Home University / *Uczelnia macierzysta* |  |

**RENTAL DATA / *Zakwaterowanie***

|  |  |  |
| --- | --- | --- |
| Rental period / *Pobyt (od-do)* | From: **/     /** | To: **/     /** |
| Total months / *Liczba miesięcy* | months | |
| I can share a room with another Erasmus student (Mogę mieszkać w pokoju z innym studentem Erasmusa) | YES  NO | |

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| --- |
| I agree to accept a room in university dormitory and to pay all fees requested in advance. I also agree to fully comply to all regulations concerning accommodation.  Date: ……………………… **Student’s signature**: …………………………………………………. |

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| **If you want to reserve a room please send**  **this Accommodation Application Form via email as soon as possible to:**  University of Life Sciences in Lublin, Promotion and International Exchange Office,  Akademicka 15, 20-950 Lublin, Poland; Tel.: +48 81 445 65 38, +48 81 445 65 73  **e-mail: erasmus@up.lublin.pl**  More **information** about rooms, equipment, dormitories and regulations…  You can find on the website: http//www.up.lublin.pl/eng |