**THE EMPLOYER’S APPLICATION FORM**

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| Name of the employer |  |
| Address of the employer |  |
| Tax Identification Number |  |
| National Business Registry Number |  |
| National Court Register (if applicable) |  |
| Website address |  |
| Name of the person representing the employer (authorized to sign an agreement) |  |
| Name, surname, and position of a contact person |  |
| Email address to the contact person |  |
| The telephone number of the contact person |  |
| Name and surname of the Internship Supervisor at the Host Institution |  |
| Email address to the Internship Supervisor at the Host Institution |  |
| The telephone number to the Internship Supervisor at the Host Institution |  |
| Are you interested in receiving information concerning projects and events directed to Employers which are organized by the ULS in Wrocław (i.e., internship projects, job fairs, etc.)? | yes  no |
| The declared number of internship places | 1  2  3  4  other (how many?) … |
| The place of implementing internship if differ from data provided in contact details (i.e., local office, branch, etc.) |  |
| Language in which an internship may be implemented | Polish only  English only  Polish and English  other languages………………………… |
| The date for completing an internship | in winter semester  in summer semester  an internship may be implemented at a different time  according to the individual University’s and the Host  Institution approval |
| The internship offer is directed especially to students of the following fields of study | Administration  Internal Security  National Security  Journalism and Social Communication  Geodesy and Cartography  Human Resources and Coaching  Information Technology  Media Design and Visual Marketing  Creative Media: game design, animation, effects  Creative Media: game and animation design  Pedagogy  Preschool and Early School Education  Special Education  Social work  Psychology  Modern Arts -Design now! |
| The procedure of applying to internship admission | sending internship referral  sending internship referral and filling out a test of  assessing the competence  sending internship referral and interview  other, …………………… |
| The procedure of communicating with students applying for an internship | e-mail address…………………………………………….  application is available at ………………………….  profile available in job services, apprenticeship, and internship of the ULS………….……  other, ………………………………………….……… |
| Is an offer available to people with disabilities? | yes  no |
| Do you identify infrastructure barriers regarding suggested places for implementing internships? | yes  no |
| Do you have any improvements for people with disabilities (technical, IT, etc.)? | yes, for people …………………………………………………………………….  (Indicate the type of disability)  no |
| The Employer declares that:  has read and undertakes to comply with „Internship program and regulation"  is an entity/employer giving an intern/apprentice opportunity to acquire practical experience concerning competencies compatible with educational outcomes on the given field of studies  its business profile complies with the given fields of studies  has an infrastructure and ensures equipment of internship place enabling its proper implementation  has got the appropriate number of internship supervisors concerning the number of admitted students  shall ensure that internship supervisors hold appropriate competencies to take up their roles  is not in liquidation or bankruptcy. | |
| ………………………………………………………………………………….  (Date and legible signature of the Employer or person authorized to represent the Employer) | |

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| CONSENT FOR PROCESSING PERSONAL DATA OF **THE EMPLOYER/PERSON AUTHORIZED TO REPRESENT THE EMPLOYER**  I hereby give/deny giving\* consent for my data to be processed by the Career and Internship Office for implement selected by myself services, actions, and projects.  I confirm that I have taken note of the above-mentioned information clause.   |  |  | | --- | --- | |  | (Date and legible signature of a person authorized to represent the Employer) | |

**Information clause**

1. The University of Lower Silesia with its registered office in Wrocław (the ULS) declares to be the Controller of personal data meaning the Personal Data Protection Act concerning personal data of natural person representing the Employer and their employees engaged in completion a contract, as well as natural persons pointed by the Employer as a contact person. In connection with that, the ULS contracts the execution of the notification obligation for people aforesaid in the previous sentence.
2. The Controller of the personal data is the University of Lower Silesia with a registered office in Wrocław, ul. Strzegomska 55, 53-611 Wrocław, TIN: 894-230-62-69, Tel.: +71 356 15 09, e-mail: [rektorat@dsw.edu.pl](mailto:rektorat@dsw.edu.pl)
3. The Controller has appointed the Data Protection Supervisor who may be contacted by the following e-mail: [iod@dsw.edu.pl](mailto:iod@dsw.edu.pl)
4. Provided personal data will be processed to conduct the implementation of services and tasks carried out by the Career and Internship Office, acting based on the tasks resulting from the Organizational Regulation of the University of Lower Silesia, issued by the Rector’s Order No 34/2020.
5. The categories of personal data include name and surname, position/function held, telephone number, e-mail address, name of the workplace/place of employment, address, data dedicated to the process/service.
6. The recipients of personal data are employees of the Career and Internship Office, Programme Directors of fields of study, Deans and Deputy Deans implementing tasks related to the internship, University's Internship Supervisor for a given field of study, and employees of appropriate Dean's Office. Personal Data shall be provided also to the Controller's suppliers to the extent necessary for the proper implementation of tasks, especially to IT services providers.
7. Your data will not be provided to any third country and international organization.
8. Your data will be stored until the notification of finishing cooperation as part of cooperation.
9. You have the right to access your data, its correction, erasing, or restriction, the right to object to the processing of your data, as well as the right to transfer data according to the law, the right to withdraw the abovementioned consent at any time without influencing on the lawfulness of data processing that was given before its withdrawal.
10. You have the right to file a complaint to the Supervisory Authority - The Inspector General for the Protection of Personal Data, in the event you consider that processing your data violate resolutionsof the Act of 10th May 2018 on protecting personal data (uniform text Journal of Laws [*Dziennik Ustaw*] of 2018, item 1000) or provisions of the European Parliament and of the Council 2016/679 of 27th April 2016 on the protection of individuals concerning the processing personal data, and the free movement of such data, and repeal the Directive No 95/46/WE (the general regulation on the protection of personal data) of 27th April 2016 (Official Journal of the EU L No. 119, page 1).
11. Your data fail to be automatically processed or profiled.
12. Lack of consent to process personal data prevent from using of services and activities supplied by the Career and Internship Office of the University of Lower Silesia with its registered office in Wrocław.
13. Submitting personal data is voluntary.

*\*delete as appropriate*