

Bilateral Exchange 2025/2026

REQUIRED DOCUMENTS

1. Student application form + photo

Fill out in capital letters. Students should specify in their application the specialization they have chosen.

- 2. Curriculum vitae
- 3. Cover letter with justification for choosing a university

4. Confirmation of language proficiency required by the receiving institution

For example: certificate (ITLZ, TOEFL, Cambridge, etc.) or confirmation from the University of Warsaw School of Foreign Languages.

Information regarding language proficiency should state at least B2 level or higher depending on the receiving institution's requirements.

5. Statement from the International Office of the Faculty (Student office) containing:

- 1) Student's grade point average (BA students GPA from previous year, MA students GPA from BA diploma)
- 2) Confirmation of completion of previous study term
- 3) Confirmation of settled payments
- 6. Statement regarding the protection of personal data
- 7. A copy of the RULES BILATERAL EXCHANGE signed on the last page
- 8. Academic Advisor's Opinion
- 9. Supervisor's Opinion (if you already have a supervisor)



STATEMENT REGARDING THE PROTECTION OF PERSONAL DATA

- 1. The administrator of personal data of candidates and qualified students is the University of Warsaw represented by the Rector, based at Krakowskie Przedmieście 26/28, 00-927 Warsaw, Poland. The administrator can be contacted by using one of the means provided on the website://www.uw.edu.pl/kontakt/.
- The administrator has appointed a Data Protection Inspector (IOD), who can be reached at this email address: <u>iod@adm.uw.edu.pl</u>. The IOD can be contacted in all matters regarding the processing of data by the University of Warsaw and the use of data processing rights.
- 3. The personal data of candidates and qualified students will be processed for the purpose of participation in the bilateral exchange program.
- 4. Candidates' agreement constitutes the grounds for the processing of their data.
- 5. While the provision of candidates' personal data is voluntary, failure to provide them will exclude them from the qualification process. The provision of personal data of qualified students is obligatory and failure to provide them will exclude them from the programme.
- 6. Personal data will be stored for the period of 5 years.
- 7. Qualified persons have the right to access their personal data, correct them and limit their processing. Candidates have the right to withdraw their consent at any moment. Withdrawal ought to be communicated to address: swzmpb@uw.edu.pl
- 8. Candidates and qualified persons have the right to lodge a complaint with the President of the Office for Personal Data Protection when they feel that data processing violates the provisions of Regulation No 1288/2013 (GDRF).

I hereby agree to the processing of my personal data for the purpose of participation in the Erasmus+ program.

Warsaw, date......Signature.....



STUDENT APPLICATION FORM

Academic year:

Name and surname:					1
PESEL:					
Program of studies:					
Cycle (BA/MA/Ph.D.):	Y	ear of studies:			
Type of studies: full-time / part-time	e / evening (mark)		Photo	
Specialization (if applicable):					
Student ID card number:					J
Phone number:					
E-mail:					
Address:					
Grade point average - GPA (as state	d by the Inte	rnational Office of the WNPiSM):			
Selected university					
Additional information (organization	al experienc	• • •			
Foreign language skills: A1, A2 (beg i	inner), B1, B		i t) and i	s it confirmed by a	certificate?
The Faculty Qualification Commission provided.	on reserves t	he right to verify students' languag	ge skills	regardless of the d	ocuments
Language	Level	Certificate	Ability t	o study in that langu	age
			YES / N	0	
			YES / N	0	
			YES / N	0	
I hereby certify that: 1. I have familiarized myself with the of 2. My language skills meet the requirem I hereby certify that the above informat disqualification of my application.	nents of select	ted institutions.			he automatic

Warsaw, date.....Signature.....



TO BE COMPLETED BY THE FACULTY INTERNATIONAL OFFICE

Program, cycle and year.....

Academic year

Warsaw, date.....

Certificate

ENROLMENT – BILATERAL EXCHANGE PROGRAMME

I hereby certify that student
(name, surname, program, cycle and year, specialization)
1. Has a grade point average (GPA) of:
2. Has/hasn't obtained credits for all courses in their first/second/third study term
3. Has/hasn't paid tuition fees and settled all required payments

4. Comments:

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Signature and stamp of the International Office