His Magnificence Rector of The Fryderyk Chopin University of Music in Warsaw

APPLICATION FORM
For Postgraduate Studies / Postgraduate Artistic Training

Please accept my application form for ..............................................................
(name of Postgraduate Studies or Postgraduate Artistic Training)
at the Department of ............................................................................................................................
(name of Department)
in an extramural form in the Academic Year 20....../20......

...........................................................
(candidate’s signature)

With the application form I enclose:

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<th>No.</th>
<th>List of documents</th>
<th>Signature if the candidate collects the documents</th>
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Statement
I hereby agree to have my personal data processed by the Fryderyk Chopin University of Music in Warsaw for the purposes of the completion of goals and tasks of the University, as well as the completion of the rules in force.

...........................................................
(candidate’s signature)

Commitment
In case if I am accepted for Postgraduate Studies / Postgraduate Artistic Training at the FCUM, I commit myself to obey the Rules of Postgraduate Studies and Postgraduate Artistic Training and to pay the tuition fee.

...........................................................
(candidate’s signature)