## FORM

## FOR CONSENT FOR THE PROCESSING OF PERSONAL DATA WHEN APPLYING FOR TRAINING AT THE HIGH SCHOOL OF INSURANCE AND FINANCE

I, .....,

I agree that the personal data voluntarily provided by me, as well as the personal data contained in the documents submitted by me, will be processed by VUZF for the purposes of my application for training in the educational and scientific degree "doctor" in the doctoral program "......" in the university and to receive information from him in this connection.

I am informed that I can withdraw my consent to the processing of my personal data at any time by making an express written statement to this effect to the university with a special form at the address: Sofia, 1618, "Ovcha Kupel" district, str. Gusla" No. 1 or at the e-mail address: info@vuzf.bg.

More information on the storage, processing and deletion of my personal data, as well as on my rights in relation to their use, can be found in the Personal Data Protection Rules of the Higher School of Insurance and Finance (<u>http://www.vuzf.bg/?Template=VUZFTermsOfUse</u>).

Date:

Signature: