

RECRUITMENT COMMITTEE DECISION:	☐ Qualified	☐ Not qualified
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Project Title: Silesian University of Technology as a university promoting modern trends in education and profiling the development of academic teaching staff and doctoral students

APPLICATION FORM

CANDIDATE INFORMATION FOR THE PROJECT

BASIC INFORMATION:

Name and surname	
Telephone number	
E-mail address	

ORGANIZATIONAL UNIT:

Department or other organizational unit	
Department or other internal unit	

CANDIDATE STATUS AND FULFILMENT OF PARTICIPATION CRITERIA:

Doctoral School participant ☐ Yes ☐ No

Silesian University of Technology employee ☐ Yes ☐ No

Employment group: ☐ teaching ☐ research and teaching ☐ other:

Academic position: ☐ assistant ☐ assistant professor ☐ professor ☐ other:

Do you conduct teaching classes/courses? ☐ Yes ☐ No

During the 12 months preceding the date of signing this application form, did you participate in projects carried out at the Silesian University of Technology aimed at improving skills, in particular in training programs, continuing education courses, internships, or study visits co-financed by the Operational Program Knowledge Education Development (POWER) or the European Funds for Social Development (FERS).

☐ I have participated ☐ I have not participated

I hereby express my willingness to participate in the Project and thus declare my need to develop digital competencies, competencies in modern teaching methods, competencies related to green transformation, and competencies in the field of universal design.

☐ Yes ☐ No

I declare that the newly acquired competencies/qualifications obtained through participation in the Project will be used in my current or future teaching activities.

☐ Yes ☐ No

CANDIDATE'S SPECIAL NEEDS:

In connection with the application for participation in the Project, and thus the willingness to participate in four mandatory training courses, please indicate whether you have any special needs that should be taken into account in order to ensure comfortable participation conditions during the training sessions:

☐ Yes, I would like to report special needs (e.g. extended breaks, elevator access):

☐ No, I do not report any special needs

CONSENT TO OBTAIN A CERTIFICATE:

I consent to the Project Office obtaining:

- in the case of a University employee - a certificate of employment from the Human Resources Department,
 - in the case of a doctoral student - confirmation of doctoral student status from the Doctoral School,
- for the purpose of verifying compliance with the Project participation criteria regarding the target group of project participants. The document will be used solely for the purposes of implementing the above-mentioned project.

☐ YES, I give my consent ☐ NO, I do not give my consent

STATEMENTS:

1. I declare that if I do not consent to the Project Office obtaining a certificate of employment/status, I undertake to independently obtain and submit the appropriate certificate confirming, respectively, my employment or doctoral student status no later than on the date of submission of the recruitment documentation, including this application form, in order to enable verification of compliance with the Project participation criteria.
2. I declare that I have read the Project Regulations, accept their provisions, and undertake to comply with them.
3. I declare that I have read the information clauses and information concerning the processing of personal data, including in particular:
 - the Beneficiary's Information Clause,
 - the Information Clause of the Intermediate Body,
 - the Information Clause of the Minister competent for regional development,
 - information on reporting non-compliance with the z KPON,
 - the internal reporting procedure and whistleblower protection procedure.

At the same time, I acknowledge that the above clauses and information are available on the Project website at: <https://portal.polsl.pl/dd2/klauzule-informacyjne/>

4. I declare that I have been informed that the Project is co-financed by the European Union under the European Social Fund Plus.
5. I declare that I have been informed about the various available communication channels with the Project Office, i.e. in person, by e-mail, by telephone, and via Zoom or Teams communicators.
6. I declare that the data provided in this document are true and correct, and I am aware of the criminal liability for making false declarations under the Penal Code. At the same time, I undertake to immediately inform the Recruitment Committee of any changes to data that may affect the recruitment process and of any changes to the data contained in this form.

Place and date

Project Candidate's signature