**APPLICATION FORM**

* **for the COURSE OF CHINESE LANGUAGE AND CULTURE**
* **for the COURSE OF CHINESE LANGUAGE AND CULTURE IN TOURISM**

 *(tick off the course you wish to attend)*

**Please enter in the form below the information needed for the purpose of organizing and scheduling the course**

Name and surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (street, town, postcode): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: ­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and surname of the payer (*if the payer is another person*):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I wish to enrol in the course at the **beginner** / **advanced** level (underline *the level of your current knowledge of Chinese*).

CONSENT

In accordance with the General Regulation on Personal Data Protection, I give the administrator, Confucius Classroom Koper at the University of Primorska (hereinafter KUK UP) voluntary explicit consent to process the above personal data for the following purposes (mark “yes” or “no”):

|  |  |
| --- | --- |
|  | Purpose |
| YES NO | Take photos or make video recordings during the course.  |
| YES NO | Post photos and video material on the website and other media channels at UP FHŠ and KUK UP. |
| YES NO | Use photos for promotional purposes (leaflets, posters). |
| YES NO | Receive notifications about current events (courses, workshops, one-off events) organized or co-organized by KUK UP. |
| YES NO | Provide information related to the Courses of Chinese language and culture.  |

By signing this form, I confirm that I am aware of my rights in relation to the personal data provided, namely that:

* by signing, I authorize the Confucius Classroom Koper UP to store and process my data for the above listed purposes for one year after the course has ended;
* I may request access to my personal data, the correction, deletion or transfer of such data and restrictions regarding their processing. I may also object to the use of certain personal data.
* I can lodge a complaint with the competent supervisory authority if I believe that the personal data controller is in breach of personal data protection rules;
* the personal data provided will not be processed for any purpose other than those mentioned above;
* information about the controller, the person authorized to protect personal data and other information related to the use and protection of personal data of users can be found on the web page www.upr.si.

Please submit a completed and signed application form by 3 October 2023.

* either by postal mail to our address Konfucijeva učilnica Koper UP, Titov trg 5, 6000 Koper ;
* or the scanned document by email to kuk\_up@upr.si,
* or in person in the Confucius classroom (atrium next to UP FHŠ).

Place and date: Signature:

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Konfucijeva učilnica Koper Univerze na Primorskem, Titov trg 5, 6000 Koper

Tel. št.: +386 (0)5 611 76 68 ali +386 (0)31 381 788

Elektronski naslov: kuk\_up@upr.si

<https://www.fhs.upr.si/sl/oddelki/konfucijeva-ucilnica-koper>