

ENROLMENT NO.		UNIVERSITY	FDŠ / EVRO-PF / FSMŠ
NAME AND SURNAME		STATUS	full-time / part-time undergraduate / postgraduate
DATE OF BIRTH		E-MAIL	
ADDRESS		TELEPHONE NUMBER	

PATRON NO.: _____ (filled out by librarian)

I, the signatory, certify that the above information is correct. In the event of change, I undertake to inform the library on the first visit thereafter. By signing this Registration Statement, I expressly consent that my above-mentioned personal data is used for the purpose of keeping records of members and library materials for the time of my membership in the library, and until the day when I settle all my monetary obligations and returns of borrowed library materials.«

Location: _____

Date: _____

Signature: _____

Notification:

You can cancel your consent at any time by writing to knjiznica@nova-uni.si and requesting the cancellation of the consent and the expulsion from the UKNU. As an individual, you are entitled to request correction or deletion of personal data or limit the processing of personal data from the administrator at any time. You are also entitled to an objection to the processing of personal data and to the transferability of personal data. If you believe that we are not processing your personal information in accordance with the given consent, you can file a complaint with the Information Commissioner.

By signing the above, I declare that I am aware of the right and ability to request, at any time, with a written declaration, that the UKNU permanently or temporarily stop using my personal data for the purposes stated above.