



APPLICATION FORM

TO THE MENTORING PROGRAMME "*POWER OF THE COMMUNITY*"

Please submit **your** application no later than **31.01. 2025**.

1.CANDIDATE DATA	
NAME*	
FACULTY*	
FIELD OF STUDY*	
TYPE OF STUDY*	
MODE OF STUDY*	
YEAR*	
TELEPHONE*	
E-MAIL */**	

*mandatory space

**Please provide email with domain edu.p.lodz.pl and/or dokt.p.lodz.pl and/or p.lodz.pl

2.WHY DO YOU WANT TO PARTICIPATE IN THE MENTORING PROGRAMME?*/** (max. points 28)

*mandatory space

** the maximum number of characters with spaces is 1,000 (without spaces)



**3.CANDIDATE'S ACHIEVEMENTS****3.1.Participation in scientific research, artistic projects (max. number of points 15)*.**

ACHIEVEMENT NAME	DATE	DESCRIPTION	TYPE OF PROJECT (domestic/foreign, individual/group)	NUMBER OF ASSIGNED POINTS**
ACHIEVEMENT NAME	DATE	DESCRIPTION	TYPE OF PROJECT (domestic/foreign, individual/group)	
ACHIEVEMENT NAME	DATE	DESCRIPTION	TYPE OF PROJECT (domestic/foreign, individual/group)	

3.2.Activity in organizations: students, research clubs, associations, foundations (max. number of points 15)*.

ORGANIZATION NAME	DATE	TYPE OF ORGANIZATION: research club, association, foundation, etc.	FUNCTION PERFORMED, ACTIVITY	NUMBER OF ASSIGNED POINTS**
ORGANIZATION NAME	DATE	TYPE OF ORGANIZATION: research club, association, foundation, etc.	FUNCTION PERFORMED, ACTIVITY	
ORGANIZATION NAME	DATE	TYPE OF ORGANIZATION: research club, association, foundation, etc.	FUNCTION PERFORMED, ACTIVITY	

3.3.Student internships*, placements, work (max. number of points 9)*.**

ENTITY NAME	DURATION.	DESCRIPTION OF RESPONSIBILITIES	COMPATIBILITY WITH FIELD OF STUDY (yes/no)	NUMBER OF ASSIGNED POINTS**
ENTITY NAME	DURATION.	DESCRIPTION OF RESPONSIBILITIES	COMPATIBILITY WITH FIELD OF STUDY (yes/no)	
ENTITY NAME	DURATION.	DESCRIPTION OF RESPONSIBILITIES	COMPATIBILITY WITH FIELD OF STUDY (yes/no)	

3.4.Prizes and awards in competitions (max. number of points 9)*.

COMPETITION NAME	DATE	ORGANIZER AND DESCRIPTION OF THE COMPETITION	TYPE OF COMPETITION (university/national/individual, individual/team)	NUMBER OF ASSIGNED POINTS**
COMPETITION NAME	DATE	ORGANIZER AND DESCRIPTION OF THE COMPETITION	TYPE OF COMPETITION (university/national/individual, individual/team)	
COMPETITION NAME	DATE	ORGANIZER AND DESCRIPTION OF THE COMPETITION	TYPE OF COMPETITION (university/national/individual, individual/team)	

3.5.Certificates of competence, e.g. training, courses (max. number of points 9)*.

NAME	DATE	ORGANIZER	DESCRIPTION	NUMBER OF ASSIGNED POINTS**
3.6.Others not listed above that meet the criteria for development, e.g. company ambassador, participation in a startup, Erasmus+ exchange, exhibitions, performances, volunteering (max. number of points 15)*.				
NAME	DATE	ORGANIZER	DESCRIPTION	NUMBER OF ASSIGNED POINTS**

*Candidate can enter a maximum of 3 achievements. In case of more, the organizers will evaluate only the first three.

**Number of points will be awarded by the organizers on the basis of the submitted applications.

***Only extra-curricular.

4.STATEMENTS.

I state that I have read and accepted the Regulations related to the Mentoring Programme "Power of Community"	YES* <input type="checkbox"/>
I state that I am an adult (as of 29.11.2024). Statement required due to the Act of May 13, 2016, on Prevention of Sexual Crime Threats and Protection of Minors (i.e. Journal of Laws of 2024, item 560).	<input type="checkbox"/> YES/N <input type="checkbox"/>
Statement of criminal liability Warned of the criminal liability under Article 233 of the Polish Criminal Code for making a false statement or concealing the truth, I declare that the data provided are true.	YES* <input type="checkbox"/>
GDPR I state that I consent to the processing of my personal data for the purposes of the mentoring programme in accordance with Appendix No. 1 to the Regulations of the Mentoring Programme "Power of Community"	<input type="checkbox"/> YES*

*mandatory space