SZKOŁA PODSTAWOWA NR 9 W KIELCACH

## 25-120 Kielce, ul. Adolfa Dygasińskiego 6, tel. (41) 367-67-93, sekretariat@sp9.kielce.eu

**KARTA ZGŁOSZENIA DZIECKA DO INNOWACYJNEJ KLASY 4 „Biol-chem w 9-wiątce”**

**W SZKOLE PODSTAWOWEJ NR 9 W KIELCACH**

# Zwracam się z prośbą o przyjęcie córki/syna do innowacyjnej klasy czwartej „Biol-chem w 9-wiątce” w Szkole Podstawowej nr 9 w Kielcach

**w roku szkolnym 2022/2023**

## DANE DZIECKA:

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| Imiona */****wpisujemy dwa imiona****/* |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Data urodzenia |  |  | */miesiąc słownie***/** |  |  |  |  |

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| Miejsce urodzenia |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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**Adres zamieszkania:**

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| Miejscowość |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Adres zameldowania :**

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## DANE RODZICÓW/ PRAWNYCH OPIEKUNÓW

1. **Matka**

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| e-mail |  |

1. **Ojciec**

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| Ulica / miejscowość |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| e-mail |  |

***Świadomy odpowiedzialności karnej /art.233 KK/ oświadczam, że podane we wniosku dane są zgodne ze stanem faktycznym***

Wyrażam zgodę na przetwarzanie danych osobowych zgodnie z Rozporządzeniem Parlamentu Europejskiego

*i Rady (UE) z dnia 27 kwietnia 2016 r.(RODO).* ***Administratorem danych osobowych*** *jest: Szkoła Podstawowa nr 9 im. Adolfa Dygasińskiego w Kielcach, ul. Dygasińskiego 6,25–120 Kielce;* ***Inspektorem Ochrony Danych***: *Magdalena Jarząbek tel. 41 36 76 103 e-mail:* *iod@sp9.kielce.eu*

Celem gromadzenia danych jest rekrutacja dzieci do innowacyjnej klasy czwartej. Przetwarzanie dotyczy: danych osobowych uczniów i rodziców (opiekunów prawnych). Rodzice (opiekunowie prawni) mają prawo dostępu do treści składanych danych, sprostowania, usunięcia po okresie nie krótszym niż przewidują przepisy prawa, wniesienia skargi do organu nadzorczego. Dane osobowe będą przetwarzane na czas postępowania rekrutacyjnego w Szkole Podstawowej nr 9 w Kielcach.

Miejscowość, data Podpis matki /prawnego opiekuna

Miejscowość, data Podpis ojca /prawnego opiekuna