



SOGLASJE-IZJAVA

Podpisani/-a _____ želim pridobiti štipendijo iz Štipendijskega sklada Univerze na Primorskem in soglašam, da se v skladu s Pravilnikom Štipendijskega sklada Univerze na Primorskem moji osebni podatki uporabljajo izključno za potrebe Štipendijskega sklada Univerze na Primorskem.

Izjavljam tudi, da:

- nisem zaposlen ali samozaposlen,
- nimam statusa poslovodne osebe gospodarske družbe oziroma nisem direktor zasebnega zavoda,
- nisem vpisan v evidenco brezposelnih oseb pri Zavodu RS za zaposlovanje.

Podpis: _____

V _____, dne _____



CONSENT FORM

I, the undersigned _____, wish to obtain a scholarship from the Scholarship Fund of the University of Primorska and I agree that in accordance with the Rules of the Scholarship Fund of the University of Primorska, my personal data is used exclusively for the needs of the Scholarship Fund of the University of Primorska.

I also declare that:

- I am not employed or self-employed,
- I do not have the status of a manager of a company or I am not the director of a private institution,
- I am not registered in the register of unemployed persons at the Employment Service of Slovenia.

Signature: _____

In _____, on _____