



STATEMENT ON PROCESSING PERSONAL DATA

The undersigned applicant _____
(full name) holding the Personal Identification Number (CNP)/ Passport no. / ID card
number _____

acting as a candidate for the Competitive entrance exam to "Victor Babeș" University of
Medicine and Pharmacy of Timisoara, hereby agree and confirm my consent regarding
the use and processing of my personal data (according to the provisions of the *Regulation
on the protection of individuals with regard to personal data processing and the free
circulation of this data*) by "Victor Babeș" University of Medicine and Pharmacy of
Timișoara and the competent institutions.

Date:

Signature: