



Appendix 1 to the Project Implementation Regulations

PROJECT APPLICATION FORM

"Łódzkie against discrimination",

project no. FELD.07.05-IP.01-0113/24

implemented under the European Social Fund Plus, Measure FELD.07.05 –
Integration and civil society, Priority 7 – European funds for employment and
integration in the Łódź region, European Funds for Łódź 2021-2027
programme

.....
(time, date of receipt and signature of the person receiving the documents)

**THE FORM SHOULD BE COMPLETED IN BLOCK CAPITALS AND THE
APPROPRIATE FIELDS SHOULD BE MARKED WITH AN "X"**

CANDIDATE'S PERSONAL DETAILS				
First name and surname				
PESEL/Passport number			<input type="checkbox"/> No PESEL	
Date				
Gender	<input type="checkbox"/> Female		<input type="checkbox"/> Male	
Citizenship				
Phone				
Email				
PLACE OF RESIDENCE OF THE CANDIDATE				
City				
Street				
House number		Apartment		Postal
Municipality				



County		
Province		
Country		
EDUCATION OF THE CANDIDATE		
Lower than basic or no education (<i>no formal education</i>) - ISCED 0	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Primary education - ISCED 1	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Lower secondary education - ISCED 2	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Upper secondary education - ISCED 3	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Post-secondary non-tertiary education (<i>education completed at a level higher than secondary education but not tertiary education</i>) - ISCED 4	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Tertiary education (<i>education completed at the level of short-cycle studies, bachelor's, master's or doctoral studies</i>) - ISCED 5-8	<input type="checkbox"/> YES	<input type="checkbox"/> NO

CANDIDATE STATUS		
I declare that:		
I am studying, working or residing in the Łódź Province	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am economically inactive ¹ (<i>Please attach a certificate from the Social Insurance Institution (Zakład Ubezpieczeń Społecznych) or confirmation generated from the Social Insurance Institution's Electronic Services Platform² and tick the appropriate box below</i>)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

¹ Economically inactive persons are persons who are not currently part of the labour force (i.e. they are neither employed nor unemployed).

² The certificate/confirmation includes, for example, the lack of entitlement to pay social security contributions in connection with employment or other gainful activity; a certificate from the Social Insurance Institution (Zakład Ubezpieczeń Społecznych - ZUS) can be obtained by submitting, for example, an application on form US-7 or via the ZUS Electronic Services Platform (PUE). The certificate is valid for 30 days from the date of issue.



Applies only to economically inactive persons. *Please tick one appropriate answer*

I am not participating in education or training	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am a student/in education	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Other	<input type="checkbox"/> YES	<input type="checkbox"/> NO

I am unemployed³
(Please attach a certificate from the employment office)

☐ YES☐ NO

I am a long-term unemployed person⁴

☐ YES☐ NO

I am a volunteer⁵
(Please attach a copy of the contract/agreement for the provision of voluntary services)

☐ YES☐ NO

I am employed⁶
(Please attach a certificate of employment from your employer – Appendix 3 to the project implementation regulations or another document confirming employment, e.g. a copy of your employment contract, and tick the appropriate box below)

☐ YES☐ NO

³ Persons who are unemployed, ready to take up employment and actively seeking employment.

⁴ Long-term unemployed persons are unemployed persons who have been registered with the district labour office for more than 12 months during the last 2 years, excluding periods of internship and vocational training for adults. Labour market status is determined on the date of commencement of participation in the project, i.e. at the moment of commencement of participation in the first form of support in the project.

⁵ a natural person who voluntarily and without remuneration performs services on the terms specified in the Act on Public Benefit Activity and on volunteering

⁶ Employed persons are persons aged between 15 and 89 who: perform work for which they receive remuneration, from which they derive income or family benefits; persons who are employed or self-employed but are temporarily not working (e.g. due to illness, leave, industrial dispute or education or training); or persons producing agricultural goods, the majority of which are intended for sale or barter



Applies only to employed persons. Please tick one appropriate answer.

I am self-employed	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work in government administration	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work in a non-governmental organisation	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work in a micro, small or medium-sized enterprise ⁷	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work in local government (excluding schools and educational institutions)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work in a large enterprise ⁸	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work in an entity providing medical services	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at a school or educational institution (teaching staff)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at a school or educational institution (non-teaching staff)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at a school or educational institution (management staff)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at a university	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at a scientific institute	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at a research institute	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at an institute operating within the Łukasiewicz Research Network	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work at an international scientific institute	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work for a federation of higher education and science institutions	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I work for a state legal entity	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Other	<input type="checkbox"/> YES	<input type="checkbox"/> NO

⁷ The category of micro, small and medium-sized enterprises (SMEs) comprises enterprises which employ fewer than 250 persons, have an annual turnover not exceeding EUR 50 million or an annual balance sheet total not exceeding EUR 43 million.

⁸ A large enterprise is one which employs 250 or more employees, or one which, despite having fewer employees, exceeds both financial criteria (annual turnover exceeds EUR 50 million and total annual balance sheet exceeds EUR 43 million).



<p>I have experienced discrimination, i.e. I have been subjected to hate speech, inferior treatment or violence on the grounds of my ethnic origin (cultural affiliation, migration) <i>(Please attach a statement using the template in Appendix 2 to the project implementation rules)</i></p>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<p>I am a person with a disability⁹ <i>(Please attach a copy of the certificate or other document confirming your health condition)</i></p>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<input type="checkbox"/> Refusal to provide data	
<p>I am a person in a homelessness crisis or affected by exclusion from access to housing and in need of support in maintaining my home¹⁰</p>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<p>I am a foreign national/I do not have Polish citizenship. A foreign national is a foreigner, a person who does not have Polish citizenship, regardless of whether they have citizenship of other countries <i>(Please attach a copy of your passport or other document confirming your citizenship, a copy of your travel document and temporary residence permit (residence card) or a copy of your permanent residence permit or long-term EU residence permit or a copy of the decision granting international protection)</i></p>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<p>I am a third-country national/citizen of a country outside the European Union. A person who is not a citizen of an EU Member State, including stateless persons within the meaning of the Convention on the Status of Stateless Persons of</p>	<input type="checkbox"/> YES	<input type="checkbox"/> NO

⁹ A person with a disability is a disabled person within the meaning of the Act of 27 August 1997 on vocational and social rehabilitation and employment of persons with disabilities (Journal of Laws of 2023, item 100, as amended), as well as persons with mental disorders within the meaning of the Act of 19 August 1994 on mental health protection (Journal of Laws of 2022, item 2123).

¹⁰ Homelessness and housing exclusion are defined in accordance with the European ETHOS typology of homelessness and housing exclusion, which identifies circumstances of homelessness or extreme forms of housing exclusion, and the Act of 12 March 2004 on social assistance: 1) Homeless, including persons living in public spaces or in emergency accommodation; 2) Homeless, including persons accommodated in homeless shelters, women's shelters, immigrant shelters, persons leaving penitentiary/criminal/medical institutions, care institutions, persons receiving long-term support due to homelessness - specialised supported accommodation); 3) Insecure accommodation, including persons in insecure premises – temporarily staying with family/friends, i.e. living in conventional housing conditions but not in a permanent place of residence due to lack of such a place, illegally renting or illegally occupying land, persons with insecure tenancy and an eviction order, persons at risk of violence; 4) Inadequate housing conditions, including persons living in temporary/non-permanent structures, substandard housing - premises unfit for habitation according to national standards, in conditions of extreme overcrowding; 5) Persons not residing in a dwelling within the meaning of the provisions on the protection of tenants' rights and municipal housing resources and not registered for permanent residence within the meaning of the provisions on population registration, as well as persons not residing in a dwelling and registered for permanent residence in a dwelling where it is not possible to live.



<p>28 August 1954 and persons without a determined nationality <i>(Please attach a copy of your passport or other document proving citizenship, a copy of your travel document and temporary residence permit (residence card) or a copy of your permanent residence permit or long-term EU residence permit or a copy of the decision granting international protection)</i></p>		
<p>I am a member of a national or ethnic minority, including marginalised communities such as Roma <i>(According to national law, national minorities are: Belarusian, Czech, Lithuanian, German, Armenian, Russian, Slovak, Ukrainian, Jewish. Ethnic minorities are: Karaim, Lemko, Roma, Tatar)</i></p>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<input type="checkbox"/> Refusal to provide data	

SPECIAL NEEDS ARISING FROM DISABILITY (if applicable)	
<input type="checkbox"/> YES	<input type="checkbox"/> NO
Space adapted to physical disabilities:	
Alternative forms of training materials:	
Other, please specify:	
DECLARATIONS	



I, the undersigned, declare that:

- I have read and understood the rules for participation in the project "**Łódzkie against discrimination**", project number FELD.07.05-IP.01-0113/24, contained in the project implementation regulations, and I accept its provisions.
- I have been informed that the project in question is co-financed by the European Union – European Social Fund Plus under the European Funds for Łódź 2021-2027 Programme.
- The project is organised by PSYCHOLOGIJA Sp. z o.o. in partnership with Fundacja Inicjatyw Regionalnych.
- I meet all the eligibility criteria for participation in the above-mentioned project and, in accordance with the project implementation rules, I am eligible to participate in it.
- I agree to further recruitment proceedings concerning my person.
- I undertake to immediately inform the Organiser of any changes to the data provided in the recruitment form.
- I agree to the transfer of information by telephone and/or electronic means (e-mail).
- In the event of withdrawal from the project, I will immediately inform the Project Organiser.
- I have been informed that I may refuse to provide sensitive data, i.e. data concerning race, ethnicity, health, etc.
- I have been informed that submitting the application form does not guarantee qualification for participation in the project.
- I have been informed about the obligation to participate in evaluation studies conducted by the Project Organiser and external entities commissioned by the Intermediate Body – the Provincial Labour Office in Łódź.
- I consent to the processing of my personal data provided in the recruitment form for recruitment purposes, in accordance with the Regulation of the European Parliament and of the Council (EU) 2016/679 of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation).
- I undertake to provide the Project Organiser, within 4 weeks of the end of my participation in the project (also in the event of discontinuation of participation in the project), with the following documents:
 - confirming an improvement in social situation, e.g. a certificate of enrolment in education; a certificate from career



counsellors/psychologists, teachers confirming an improvement in motivation to work and increased self-confidence; certificates of voluntary work; a medical certificate confirming an improvement in health;

- confirming the acquisition of qualifications/competences: certificates/attestations.

Having been informed of civil liability for making false statements or concealing the truth, I hereby declare that the information provided in this form is true.

.....
Date and place

.....
**Legible signature of the candidate
or legal guardian of the candidate**

OTHER DECLARATIONS (please tick as appropriate)

Furthermore, I, the undersigned, declare that:

- currently:

☐ I DO NOT RECEIVE

☐ I RECEIVE

support for social and professional activation in another project co-financed by the European Social Fund Plus, and in the event of being selected to participate in the project "**Łódzkie against discrimination**", project number FELD.07.05-IP.01-0113/24, and during my participation in this project, I will not apply for support in the field of social and professional activation in another project co-financed by the European Social Fund Plus.

Having been informed of the civil liability for making a false statement or concealing the truth, I hereby declare that the above information is true.

.....
Date and place

.....
**Legible signature of the candidate
or legal guardian of the candidate**

COMPLIANCE WITH THE INFORMATION OBLIGATION REGARDING THE PROTECTION OF PERSONAL DATA

In accordance with Article 13(1) and (2) of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of



natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation), we hereby inform you that:

1. The controller of your personal data is **PSYCHOLOGIJA Sp. z o.o.** with its registered office in Lublin (20-030), ul. Obrońców Pokoju 13/5, entered in the National Court Register kept by District Court Lublin Wschód in Lublin, with its registered office in Świdnik under number 0000481435, REGON: 146942097, NIP: 7010401891 **and Fundacja Inicjatyw Regionalnych** with its registered office in Łódź (90-731), ul. Wólczańska 19/4, entered in the National Court Register kept by the District Court for Łódź Śródmieście under number 0000370189, REGON: 100993096, NIP: 7252036426.
2. In matters relating to personal data protection, you can contact: PSYCHOLOGIJA Sp. z o.o. at the following e-mail address: zarzad@psychologija.pl and, in relation to Fundacja Inicjatyw Regionalnych, at the following e-mail address: info@fundacjainicjatyw.eu.
3. The controller processes personal data on the basis of the consent given.
4. Your personal data is processed for recruitment purposes and is processed only on the basis of prior consent within the scope and for the purpose specified in the consent.
5. The legal basis for data processing is Article 6(1)(a) of the above-mentioned Regulation. Personal data will be stored for a period of five years from 31 December of the year in which the last payment of funding was made under the project for which you are being recruited.
6. The recipients of your data will be entities which, on the basis of concluded agreements, process personal data on behalf of the Controller, entities conducting evaluation studies and other controllers participating in the implementation of the Programme, i.e. IP (Provincial Labour Office in Łódź), IZ (Łódź Province Management Board) and IK UP (Minister responsible for regional development).
7. The provision of personal data to the Controller is voluntary.
8. You have the right to withdraw this consent at any time. Withdrawal does not affect the lawfulness of processing based on consent before its withdrawal, in accordance with applicable law.
9. The data subject has the right to:
 - access their data and the possibility to correct it, rectify it, restrict its processing, and in cases provided for by law - the right to delete the data and the right to object to the processing of the data;



- lodge a complaint with a supervisory authority if the data processing is in breach of the provisions of the above Regulation, i.e. the President of the Office for Personal Data Protection, ul. Stawki 2, 00-193 Warsaw.

I confirm receipt of the information clause on the processing of my personal data in accordance with Article 13 of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016.

.....
Date and place

.....
**Legible signature of the candidate
or legal guardian of the candidate**