

Appendix 1
Form

To the Head of the Military Department
(Military
Faculty) _____
(name of the OVPO)

(Full name (if any))

(name of the faculty of higher education)

Statement

I ask you to allow me to participate in the competitive selection for training at the military department (military faculty).

I consent to the collection and processing of personal data during the selection and military training period.

“ ” _____ 20 _____ (student's signature)