CODE: PO\_13\_07\_F10

## 9 Master's Degree

## To the University Rector,

I, the undersigned		
graduated of Constanța Maritime Universi	ity, Faculty of	
	, Study programme	
	, in the year,	ano
Dissertation exam in the session	, kindly approve the issuar	ıce
of my Master's Degree Diploma.		
I declare that the personal data from the U	UMS Platform are correct. Otherwise I oblige to	pa
the fee for the remaking of the Graduation	ı Diploma.	
Date,	Signature,	
I received the Master's Degree Diploma an year	nd Supplement series, no	
provisions of Regulation (EU) 2016/679 of the European Parliament an personal data and the free movement of such data. I have been informed the use of my personal data by the Constanta Maritime University and I I have learned that for more details and information, I can c University's web pages: https://cmu-edu.eu/dpo/ https://cmu-edu.eu/adm The National Supervisory Authority for Personal Data Processing. Buch	form will be processed by the Maritime University of Constanta in accordance wind of the Council of 27 April 2016 on the protection of individuals with the process that under Regulation (EU) 2016/679 I have the right to access, to intervene and to o may make a written, dated and signed application.  contact the Data Protection Officer directly or at dpo@cmu-edu.eu. or I can access the hitre - Information note on the processing of personal data or the web page that belong tarest, General Gheorghe Magheru Boulevard 28-30, Sector 1, postal code 010336, Fax: + 40-241-617260, Tel: + 40-241-664740, Web: http://www.dataprotection.ro.	ing o
Date,	Signature,	
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