THE RECTOR UNIVERSITY OF SIENA

Revenue stamp for the amount provided for by law

| | | Matriculation no |
|---|---------------|---|
| I (name, surname)having gained, at this University, a: | | |
| First cycle degree (prior to DM 509/1999) | | University Diploma or other |
| First cycle degree (prior to Divi 309/1999) | | qualification |
| First cycle degree (under D.M. 509/1999 – D.M. 2 | 270/2004) | Second cycle degree |
| in | | (D.M. 509/99 – D.M. 270/2004) |
| on (date) | | |
| Request the issue of an original degree certifi | | |
| Having been warned of the criminal liability ap no. 15 of 4.1.1968), I also declare , pursuant to 2000, that my personal details , to be written or | art.46 of Pr | residential Decree no. 445 of 28 December |
| First name(s) | surname. | |
| Born in (town/city/region/state) | | |
| Italian tax code (Codice Fiscale) | | |
| For this purpose I enclose : □ no.1 virtual revenue stamp [contrassegno teler to be applied to the original degree certificate/□ copy of receipt for payment of the fee of € 84 | diploma/ | - |
| Siena (date) | DECLARANT | |
| ·- | | (legible signature) |
| Contact address when certificate/diploma is ready: | | |
| Street | | |
| no P./ZIP code | | |
| County | | |
| State Tel | | |
| FOR THE SERVIZIO RILASCIO DIPLOMI: | | |
| I hereby collect the original certificate/diploma | | |
| Siena, | | signature: |
| Signature to confirm that the proof of identity of | f the applica | ant/delegated person has been checked: |

Clerk: