

ASKS TO BE ADMITTED TO THE FOLLOWING INDIVIDUAL COURSES

CODE	COURSE	University Education Credits (ECTS)	DEGREE/MASTER'S DEGREE COURSE
TOTAL ECTS			

To this end, I enclose:

- the payment receipt of the enrolment fee to the single course equal to **€ 130.00 for humanities and social study courses** and equal to **€ 150.00 for EU-regulated technical-scientific and healthcare type courses**;
- the payment receipt for the amount related to the credits (amount per single credit: **€ 15.00 for humanities and social study courses** and **€ 20.00 for EU-regulated technical-scientific and healthcare type courses**) equal to €

Siena, _____

Student's signature _____

AREA D ADDRESS IN SIENA OR PROVINCE

Address (street and number) _____

town _____ location _____

_____ province _____ Post Code _____ phone _____

Tick the box if the student is still looking for accommodation in Siena or the province. The student is required to communicate his/her Siena address details and any subsequent changes to the Students and Academic Office.

The applicant _____ has been _____ identified _____ by means of his/her

identity card number _____ issued on _____

by _____

driving license no _____ issued on _____

by _____

other (specify) _____ no _____

issued on _____ by _____

Siena, _____

Student's signature _____

The undersigned, pursuant to art. 46 of Presidential Decree no 445/2000, aware that anyone who issues false statements, falsifies documents or uses these is punished pursuant to the Penal Code and special laws on the matter (art. 76 of Presidential Decree no 445/2000), self-certifies his/her above mentioned status, personal qualities and details.

The University administration establishes the methods through which the declarations made on this or other supports - paper or electronic - are checked annually, analytically or on a sample basis.

Siena, _____

Student's signature _____

PART RESERVED FOR THE PERSON IN CHARGE OF REGISTRATION/ENROLMENT

The undersigned _____ certifies that the aforementioned declaration, read and confirmed by the declarant, was made and signed in his/her presence.

Siena, _____

Signature of the employee _____

I, the undersigned, DECLARE under my own responsibility

to have received, read and understood, the privacy policy pursuant to European Regulation no 679/2016, GDPR - Code regarding the protection of personal data available in the section of the portal Home ▶ University ▶ Requirements ▶ Privacy and Cookie policy

to give my consent to the University processing my data

The declarations can be presented already signed provided they are accompanied by the unauthenticated photocopy of an identity document of the declarant and by a proxy prepared in accordance with the regulations in force