

REQUEST FORM FOR THE EVALUATION OF SPECIFIC ADMISSION REQUISITES FOR 2 $^{\rm ND}$ LEVEL DEGREE COURSES

		ACADEMIC YEAR	
For the assessment of ponline procedure.	previous degree it is ess	ential to fill in this form	entirely and attach it to the
The undersigned			
	(Last name)		(First name)
born on	in		
(birth date) and resident in		(birth place)	
	(city of res	•	
(street name			no(street number)
Cell phone no		email address	
level degree course in: (name o (c) and based on the prov that, in accordance w documents, shall be p furthermore incurs in t	f the 2 nd level degree courriculum)isions of Articles 3 and with art. 76, whoever unished under the Perche loss of the benefits audents) to have obtain	ourse) 46 of the Presidential I who issues false state hal Code and the laws of art. 75, declares to the degree in	
	(curric	culum)	(class)
	in the University	ot	
(date) With a grade of			
		· · · · · · · · · · · · · · · · · · ·	academic year in the in the degree
			university credits required for

graduation²

 $^{^{1}}$ In accordance with DGPR n. 679/2016 students should be informed that the data provided will be processed by University of Siena, located in Via Banchi di Sotto 55, 53100 Siena

The data is collected and processed exclusively to carry out the institutional aims of the University; the refusal to provide your personal data could result in failure to carry out the necessary requirements and administrative procedures for the management of students' careers.

 $^{^2}$ See the appropriate section of the annual study manifesto for first and second level degree courses and single cycle degree courses for the academic year.

in(curriculum) (curriculum) O (for students enrolling in English language certificat	/		'	n the degr	cc course
o (for students enrolling in	((1855)			
	(c.a33				
		ourses wit	h/without	a B2 lev	el
□ to have a B2 level certif	icate (to be attached o	during the	online pro	cedure)	
□ to not hold a B2 level cer	rtificate and to underta	ake to obta	in one by 2	20 Decemb	er 2024
□ to be a native English spe	eaker				
Native English speakers wil	l have to complete an a	ssessment	test by 20	December	2024
e undersigned further declares	that in the academic	vears		he	/she_was
rolled in the degree course in		-			
iversity/Institute of					
d to have carried out the follow		_			
no have graduated from the Universy down-loaded from the web pa		•	ach the sel	lt-declarat	ion which
ry down todaca from the web pa	iges. segreteria oritirie	/			
L IN BLOCK LETTERS	Module (fill in only if	SSD ³	CFU⁴	Voto	
Name of exam/Integrated course	the integrated course				Data
Name of exam/Integrated course	the integrated course is composed by various modules)				Data
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³ Settore Scientifico Disciplinare= Scientific sector code ⁴ Crediti Formativi Universitari= University credits

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The undersigned declares to be aware that the response to present instance will be received at the above email address.						
Siena,	Student's signature					