UNIVERSITÀ DI SIENA 1240

To the Rector

Student no. _____

I, the undersigned,_____Tax ID (*codice fiscale*)_____

Born in_____Country_____on _____

Resident in (*full address*)_____Postal code_____Country _____

REQUEST THE REIMBURSEMENT OF FEES AND DUES FOR THE FOLLOWING REASON: (*check the appropriate box*)

□   Degree awarded by the last session scheduled for Academic Year _____

□   Exams completed by the last session scheduled for Academic Year _____

□   Winner/eligible applicant for an A.R.D.S.U. study grant

□   Recognized disability greater or equal to 66%

□   Public employee

□   More than 65 years old

□   Double payment of fees

□   Other: _____
_____

This form must be emailed to **gestione-tasse@unisi.it** using your personal university email account only (………**@student.unisi.it)**.
If possible, the administration shall make any reimbursements by deducting the appropriate amount from the next instalment of university fees.

Should this not be possible, students shall be reimbursed in accordance with the instructions they provide on their *Segreteria online* page (Home / *Anagrafica* (personal details): place of residence (address), administrative data, method of reimbursement and bank details, etc.).

The following reimbursement options are available:

RBB	**Bank transfer**	Only current accounts or cards with an IBAN of which the requesting party is the sole or joint account holder
RBP	**Post office transfer**	Only current accounts or cards with an IBAN of which the requesting party is the sole or joint account holder

Failure to provide all the information required shall preclude reimbursement.

Place_____, date _____

Legible Signature _____