

APPLICATION FOR ADMISSION TO A POST-GRADUATED MASTER COURSE

PERSONAL DATA

Family name and First Name _____ Gender M ☐ F ☐

Nationality Italian ☐ EU Citizen(*) _____ No EU Citizen (*) _____

Tax identification number

Place of birth _____ Province _____ Date of birth _____

(*) please specify

PLACE OF RESIDENCE

Town	Province	PostCode	Country
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Address

Phone _____ E-mail _____

ADDRESS (if different from the place of residence)

Town	Province	PostCode	Country
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Address	Phone
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EDUCATIONAL QUALIFICATIONS

SECONDARY SCHOOL/HIGH SCHOOL

Please specify the type of school (for ex. humanities, sciences, art , technical, commercial, vocational, etc.)

Mark _____ Year of graduation _____

UNIVERSITY

Institution _____ Faculty _____

- | | | | |
|---|--|--|--------------------------------|
| <input type="checkbox"/> Graduating students (final year) | <input type="checkbox"/> The specialist degree or old system university degree | <input type="checkbox"/> II level Master | <input type="checkbox"/> Other |
| <input type="checkbox"/> The degree | <input type="checkbox"/> Para-university degree | <input type="checkbox"/> I level Master | |

Course/Orientation

Mark/Average marks (**) _____ Date of graduation _____ Degree issued by the Country _____

Have you attended vocational training course, recently YES ☐ NO ☐

If yes, please mention the last course attended Title_____

Organisation _____ Year of attendance _____

Course ☐ with fee ☐ cost free

Final certificate issued

- ☐ Professional qualification ☐ Job licence ☐ Specialization ☐ Attendance ☐ Qualification

(*) Specify nationality

(**) Expected marks for graduands

PROFESSIONAL CONDITION

(Write the same professional status indicated in the “present prevalent professional condition”)

- ☐ I am looking for a first job (never worked, I am not a student enrolled to a regular school/university studies and I look for a job)
- ☐ I have a job (included professional, free lance, part time, seasonal employment, Wage Supplementation Fund)

I work at _____ (***) since _____

Duties performed _____

Tax identification number /Enterprise VAT number _____

Enterprise address _____

(**) Mention here if you are a professional

- ☐ Unemployed (work lost, or women wishing to come back to work)
- ☐ Enrolled in a mobility list
- ☐ Student (attending a regular school/university course studies, for ex. a graduand)
- ☐ Inactive (he /she has no job and does not look for it)
- ☐ Housewife
- ☐ Apprentice

OTHER INFORMATION

How do you know about the course

- | | |
|--|---|
| <input type="checkbox"/> Poster | <input type="checkbox"/> COREP information desk |
| <input type="checkbox"/> Picture post card | <input type="checkbox"/> University offices |
| <input type="checkbox"/> Leaflet | <input type="checkbox"/> Newsletter ((specify which one) |
| <input type="checkbox"/> Newspaper (specify which one) | <input type="checkbox"/> Internet (specify which site or search site) |
| <input type="checkbox"/> Printed or electronic training courses catalogues (specify which one) | <input type="checkbox"/> Corep web site |
| <input type="checkbox"/> Information offices for students ((specify which one and in which town) | <input type="checkbox"/> Conferences and Workshop (specify which one) |
| <input type="checkbox"/> Employment agency | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Radio/television advertising | <input type="checkbox"/> Lecturers |
| <input type="checkbox"/> Almalaurea communication | <input type="checkbox"/> Friends, relatives |
| <input type="checkbox"/> Public offices (region or province) | <input type="checkbox"/> Other (specify) |

At the present I live with

- | | | | |
|--|---|----------------------------------|--------------------------------|
| <input type="checkbox"/> My parents | <input type="checkbox"/> Husband/Wife – cohabitant | <input type="checkbox"/> Friends | <input type="checkbox"/> Other |
| <input type="checkbox"/> Only with a single parent | <input type="checkbox"/> Husband/Wife – cohabitant and children | <input type="checkbox"/> Alone | _____ |

I am registered in unemployed lists : (please specify year and month of registration _____)

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> No list | <input type="checkbox"/> Seamen | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Employment agency | <input type="checkbox"/> Show business | |

I ask to be admitted to Post-Graduated Master Course selection

Academic year _____

I enclose the following documents

- | | |
|---|---|
| <input type="checkbox"/> Degree certificate with marks of the exams (when existing), for final-year students certificate of passed exams with marks (****). For students with foreign study qualification: declaration of value related to your degree and a certificate with the translation of all the passed exams | <input type="checkbox"/> Copy of a passport or identity card valid |
| <input type="checkbox"/> Curriculum vitae in a European format | <input type="checkbox"/> Copy of tax code |
| <input type="checkbox"/> Title of the thesis and one page abstract | <input type="checkbox"/> 1 photo (identity card format) |
| | <input type="checkbox"/> Module "Present Prevalent Professional Condition" ** |
| | <input type="checkbox"/> Substitutive declaration of certification Form ** |

In order to regularize the application form, the foreign students, coming from countries indicated in the Visa System and the Entry of Aliens into Italy and the Schengen Area (http://www.esteri.it/doc/5_32_183b.pdf), must deliver to the secretary's office the study visa for multiple entrance (type D) and the residence permit.

(**) It is necessary to fill in this form only if required by instructions for enrolment available on the web site or on the Master/Course Guide.

(****) Self-certification is allowed according to DPR 445/2000 artt. 46-47 (only for students with Italian study qualification).

I declare I have taken note of all the conditions of selection, participation and attendance mentioned in the Training Guide and on COREP web site. In the event of successful selection, I am not bound to confirm my enrolment to the Master/Course. In the event of unsuccessful selection, COREP is not bound to admit me to the Master/Course. Furthermore COREP reserves the right to cancel the Master/Course failing the minimum conditions required.

INFORMATION AND CONSENT

Pursuant to the legislative decree no. 196/2003 Data Protection Code, COREP declares that the data processing is indispensable for the purposes of this application form and for purposes connected with the performance of the COREP institutional activities.

With this signature I permit the use of my personal data for the purposes related to this application form and in compliance with the above mentioned legal regulations.

Date.....

Signature.....