

SCHOLARSHIP APPLICATION FORM

**AL MAGNIFICO RETTORE
UNIVERSITA' POLITECNICA DELLE MARCHE**

The undersigned _____ asks to be admitted to the selection for the granting of scholarships to International students admitted to the Master's Degree in "**INTERNATIONAL ECONOMICS AND COMMERCE**" of the Università Politecnica delle Marche, academic year 2015/2016.

To this end, in accordance with Articles. 46 and 47 of Presidential Decree n. 445/2000, and aware that whoever makes false statements or uses false documents is punishable under the Italian Penal Code and the specific laws, declare under his own responsibility the following:

PERSONAL DATA

Surname..... Name

Place of birth Date of birth

Citizenship

RESIDENCE

Country Address.....

Postal Code City.....

Tel..... Cell.

e-mail

DOMICILE (if different from residence)

Address..... Postal Code

City Tel.

ACADEMIC POSITION

Successfully admitted to the first year of the Master's Degree in "INTERNATIONAL ECONOMICS AND COMMERCE" by the Admission Committee.

ATTACHMENTS:

Copy of passport or other identity document

By signing this application, the undersigned declares to be aware that these data will be used for the purposes of this selection and management, within and for the institutional purposes of the Public Administration (Legislative Decree 30.06.2003 n. 196).

Read, confirmed and signed.

.....

Place and date

The undersigned

.....

(Full signature)