

ENROLMENT APPLICATION FORM - POSTGRADUATED PROGRAMME

TO THE RECTOR OF POLITECNICO DI MILANO

The undersigned				
Surname	Name			
Born in	(Prov./state)	_ (Prov./state) on		
Country	Citizenshi	p		
TAX CODE				
Town of residence	(Province/s	state) Postal code		
Street address				
District	of			
Town of domicile	(Pro	v./state) Postal code		
Street address				
District				
		e-mail		
	ASKS:			
to register for the Advanced Study Progra		to		
		the provisions of Presidential Decree no of the penal code in the event of fals		
	ES UNDER HIS/HER OV	WN RESPONSIBILITY:		
that he/she possesses the following edu	cational qualifications:			
☐ University diploma ☐ Bachelor's de	egree University degree	e under the traditional Italian system		
\square Specialised/Teaching degree \square Equiv	valent university degree or	diploma ☐ Foreign degree or diploma		
in				
from the University of				
on date	with the following mark:	/		
□ not to be enrolled at any other Un courses of the same or different Facu		cation Institute, or in any other Universit 42 R.D. 1933 no. 1952).		
☐ to be enrolled at the University				
at the course				
Milan,		Full legible signature		
Provide prompt notification	on of any changes in this in	formation to master@polimi.it		
	, c	motor opportunit		

Attach a recent photograph in identity card format, signed at the bottom.

THE UNDERSIGNED ALSO DECLARES:

that the photograph appearing above is a photograp	n of:			
Surname	Name			
Born in	(Prov./state)	_ on		
Country	Citizenship			
Details of Identification Document:				
☐ identity card no issued by the	Town of	on		
☐ driver's licence no issued by the	e Prefecture of	on		
□ passport no issued by the	Police-office of	on		
other(check the box identifying the type of document exhibited* and fill in with details)				
THE UNDERSIGNED SHALL FORFEIT THE RIGHT TO REGISTER IF IT SHOULD EMERGE THAT THE CONTENT OF THE DECLARATIONS IS UNTRUTHFUL. UNTRUTHFUL DECLARATIONS SHALL BE PUNISHED UNDER THE PENAL CODE AND THE APPLICABLE SPECIAL LAWS (sections 75 and 76 of Presidential Decree no. 445 dated 28.12.2000).				
THE UNDERSIGNED HEREBY AUTHORISES				
this University, pursuant to EU Regulation no. 2016/679 on data protection personal data, the processing of personal data solely for the purposes of enrollment and management of the master and in anycase consents to disclose personal information to third parties, in particular: - to public and private bodies interested in possible recruitment; - to proposing training courses; to the Treasurer Bank of Politecnico di Milano for related services to taxes; - to institutions managing loans of honor, housing, flexible employment contracts, cultural and recreational activities and / or sports. It also authorizes the use of data for statistical purposes in compliance with procedures and authorizations provided for by the aforementioned legislation. The information on the processing of data and the rights of the data subject is available on the website www.polimi.it/privacy/				
Date	Signature			

The following documents are enclosed:

- 1 photograph in identity card format (1 of which is glued to this form)
- Copy of residence permit (for non-EU citizens)

^{*} Students must display a valid identification document when submitting the application. If the application is submitted by someone else, a photograph of the student's valid identity document and a photograph signed by the student must be enclosed.