

Attachment A _

ACADEMIC YEAR 2015-2016 Submission at the Scholarship of the Master of Science in Product Design

(Degree Class: LM12)

The undersigned, according to the D.P.R. 28 December 2000, n. 445, DECLARES

Surname					Name				
Enrolled to the Master of Science in Product Design (Degree Class: LM12)									
ID Student									
Year of Enrolment						Year	1		2
Date of Birth				Plac	e of Birth				
Fiscal Code									
Address (in Italy)								n.	
City				Cod	e				
Phone				Moł	oile Phone	!			
E-mail									

DECLARES

to have a Bachelor Degree obtained in a Foreign University (not Italian):

Bachelor Degree in							



Grade	Max Grade	Min Grade
University		
City	Country	

to have obtained at the least the Credits (CFU) of the first semester of the years of the Program of Master of Science in Product Design:

List of the Exams	Grade	Date of the Exams



APPLY

For the scholarship of the Master of Science in Product Design fr the a.y.2015-2016.

Roma,

Signature