



# UNIVERSITÀ DEGLI STUDI DI BERGAMO

DEPARTMENT OF FOREIGN LANGUAGES, LITERATURES AND CULTURES

## Workshop application form - Academic Year 2017-2018

### 1. Personal Data

I, the undersigned

Surname

First Name:

Cell phone Number

Email

### 2. Enrolled in the study course (*indicate as appropriate*)

Other (Please specify: for example qualified enrollment in the MA course of...)

Student number (Matriculation Number)

### 3. Declaration of necessary requirements

*(Incomplete applications will be considered null and void. Tick as appropriate.)*

- ☐ I hereby attest that I have read the information webpage entitled [laboratori](#) – and in particular that
- I meet the specific requirements, if any, for access to workshops mentioned in this application form;
  - I am aware that false statements will lead to the automatic exclusion of my application from workshop location procedure.

### 4. Participation in the workshop

I hereby declare that I intend to participate in the workshop with the purpose of acquiring (*Select at least one option*):

- ☐ CFU necessary for the accomplishment of the MA course in which I am enrolled at Bergamo University;
- ☐ CFU, as an Erasmus student
- ☐ CFU earned only (or also) as additional requirements;
- ☐ (Only or also) certificate of attendance, as an auditor (also for Erasmus), without interest in CFU eligibility

### Requested Registration

For the academic year 2017-2018, I request to attend the following workshop:

I, the undersigned consent to the processing of personal data in accordance with D.lgs 196/2003, for all matters related to this procedure.