MASTER DEGREE COURSE ACCOUNTING, ACCOUNTABILITY AND GOVERNANCE (AAG)

Personal information	**ACCOUNTING, ACCOUNTABILITY AND GOVERNANCE** **Application for the assessment of minimum curricular requirements and of adequate preliminary skills.** **Foreign students with a non-Italian educational qualification.** FAMILY NAME.. FIRST NAME... PLACE OF BIRTH (place and country).................................... DATE OF BIRTH.. NATIONALITY.. ADDRESS.. TOWN... COUNTRY.. MOBILE PHONE... E-MAIL... SKYPE ADDRESS..
Secondary school diploma	SECONDARY SCHOOL DIPLOMA (name of certificate obtained): .... YEARS OF SCHOOL ATTENDANCE...
Foreign university degrees/certification of higher education	UNIVERSITY... DEPARTMENT... NAME OF COURSE... DATE OF GRADUATION .... FINAL GRADE.. LEGAL DURATION OF THE DEGREE PROGRAM ....

SURNAME .... NAME ....

PART A

For the following Scientific Areas please list the courses you attend in your career,

Major Areas of study	Disciplines accomplished	ECTS (credits) if available	Hours per year of study	Notes (to be filled by the academic board)
Accounting, Accountability and Auditing	1.................................. 2.................................. 3.................................. 4..................................			
Corporate Governance	1.................................. 2.................................. 3.................................. 4..................................			
Commercial Law	1.................................. 2.................................. 3.................................. 4..................................			
Statistics	1..................................... 2..................................... 3..................................... 4......................................			

SURNAME .... NAME ....

PART B

Please list other training/ extra curricular activities, including non-university activities (professional training courses, seminars, internships, jobs)

To be completed by the student

Description	Hosting organization	Date	Hours	Notes be completed by the academic board

PART C

In this page, please list your English Language qualifications (see “Recognized Certificates”)

English Language certificate	Certifying Body	Exam date	Score/level attained

SURNAME .... NAME ....

SURNAME …………………………………………………………………………………………… NAME ……