**To THE CHANCELLOR of**

**Università Europea di Roma**

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| **PARTICIPATION IN THE ERASMUS+ MOBILITY PROGRAMME –** ***BIP (BLENDED INTENSIVE PROGRAMME)*** ***"INTERNATIONAL ARBITRATION MOOT"*** **A.Y. 2023/2024****Application form to be handled to:** **Elena Lecci - International Relations Office**(*First floor, Corridor C*)**by January 23rd 2024** |

**1. PERSONAL DATA:**

**Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of birth: \_\_/\_\_/\_\_\_\_ Nationality: \_\_\_\_\_\_\_\_\_\_\_\_**

**Tax Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Permanent Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ n°: \_\_\_\_\_ ZIP Code: \_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ n°: \_\_\_\_\_ ZIP Code:\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_ ID Card or Passport N°: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. CURRICULUM DATA:**

**Matriculation number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Weighted average: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ECTS: \_\_\_\_\_\_\_**

**Enrolled in the \_\_\_\_\_ year of the Integrated Master’s Degree in Law**

**3.ATTACHMENTS :**

❑ Self-certification of enrolment with the updated status of student's career extracted from the Esse3 system

❑ English language proficiency certificate

❑ Copy a valid identity document

❑ Curriculum Vitae in English

**The present application form must be filled electronically.**

**According to law 679/2016 of the Regulation of the European Parliament of 27th April 2016, I hereby express my consent to process and use my data provided in this application for the purposes of Università Europea di Roma selection process.**

Rome, \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Having regard to Art. 46 and 47 of no. 445 of the Italian Presidential Decree dated 2000, I declare to be aware of the penalties in case of false declarations regarding educational background and use of false documents.**

Rome, \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

Signature

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