** U** Università degli Studi di Roma “Tor Vergata”

**object: application form – call for scholaRships summer schools - YERUN NETWORK A.Y 2016/2017**

Surname (Family name) …..……………………………………………… Name (first Name)………………………………………………….

Place of birth ……………….…………………………………… ( ………. ) Date of Birth ……………… Citizenship……………………….………………..

Fiscal Code………………………………………………………………………………… Marital Status……………………………………………

Student registered at the A.Y.2016/2017 at the ………. Year, at the University of Rome Tor Vergata,

For the Bachelor degree course / Master degree course / One-cycle degree course: ……………………………..

……………..………………………………………………………………………………..……………… Matricola: ………..……….…………….….…

Address: ……………………………………………………………………………..…………………………….……………… n. ……………..………

City ………………………………………………….………..……………..…… Province ……….………..

Zip Code………………………………

Phone number……………………………………………….………..….

e-MAIL address: ……………………………………………………..………………………………………..…………………………………………………………..

 DECLARES

To have all the requirements expected by the Call;

To have examined the Call and to accept the terms and conditions;

 REQUESTS

To apply for the assignment of the scholarship of the above-mentioned Call, in order to

attend the summer school at the University of……….……………………………………………………………………..

Title of the summer school: …………………………………………………………………………………………………………..

Dates (from – to):……………………………………………………………………………………………………………………………

In attachment, the Curriculum vitae and the motivation letter (in English or Italian).

Date ……………………………………………… Signature ……………………………………….………………………………..