**REQUEST TO PARTICIPATE**

**IN THE CALL FOR APPLICATIONS**

**FOR THE AWARDING OF 2 SCHOLARSHIPS FOR ARPM BOOTCAMP**

**FOR STUDENTS ENROLLED IN**

**THE MSC. FINANCE AND BANKING**

The undersigned (Complete Name) ………………………….……………………………….…………………………………………….…….…….

Born in ……………….…………………………………..Birth date ……………………….. Nationality ……………………….……………

Student registration number………..……….…………….….……..Fiscal code………………………………………………................

Street address ……………………………………………………………………………..………………………..………………………….…………..

City ………………………………………………….……………..………… province ……….……….. ZIP CODE …………………………

Home/office phone ……………………………………………….………..……Mobile ………………………..…………………………………

**HEREBY ASKS**

to participate in the selection for the awarding of 2 scholarships for students enrolled in the MSc. Finance and Banking as a first year student during the 2018/2019 academic year

**and DECLARES the following:**

1. to have enrolled in the MSc. Finance and Banking for the 2018/2019 academic year as a first year student;
2. to still be regularly enrolled in the MSc Finance and Banking for the 2019/2020 academic year as a second year student;
3. to have passed all of the exams foreseen for first year students by 31-10-2019;
4. to have passed all exams within the Master of Science in Finance & Banking academic program, that is, to not have received credit recognition from other academic programs at Tor Vergata or from another university;
5. to have indicated, in reference to the exams mentioned above, a weighted GPA equal to \_\_\_\_\_\_\_/30;
6. to not fall into the categories of exclusion indicated in Article 2 of the Call for Applications.
7. to have read the Call for Applications and to accept the conditions indicated therein.

Attached to this form is a copy of my valid identification document and an official list of my exams and current GPA downloaded from *Delphi*.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*PLEASE NOTE: This form must be sent to both of the following email addresses: segreteria@def.uniroma2.it and msc\_finance@economia.uniroma2.it, by 30 November 2019, with the object of the email as ‘***NAME + SURNAME** **+ MSc. Finance and Banking – Scholarship Application for ARPM Bootcamp**.

DECLARATION TO SUBSTITUTE CERTIFICATION

(Art. 46, D.P.R. 445 del 28.12.2000)

– Form for auto-certification of enrolment–

The undersigned (Complete Name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Born in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( \_\_\_\_\_\_ ) Birthdate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ house number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP CODE

Home/office phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mobile phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Aware of the sanctions foreseen in Art. 76 of Law n. 445 of 28 Dec. 2000 for providing false information and declarations or the use of false acts, I declare the following under my own responsibility:

- I am currently enrolled in the 2019/2020 academic year at the University of Rome Tor Vergata, in the Faculty of Economics in the MSc. Finance and Banking.

- I am in my 2nd year and on time with studies.

X

Normal duration of the EEBL degree programme: 2 years 3 years 4 years 5 years 6 years

X

Type of degree: ante D.M. 509/99 D.M. 509/99 D.M. 270/04

The undersigned authorizes the processing of personal data limited to the provisions of article 10 of the law of 31 December 1996, n. 675, based on which the personal data collected will be processed, also with IT tools, exclusively in the context of the procedure for which this declaration is made.

Place and date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

(complete and legible signature of name)