**ALLEGATO 1 / ANNEX 1**

**REQUEST TO PARTICIPATE**

**IN THE CALL FOR APPLICATIONS**

**FOR THE ASSIGNMENT OF 2 ‘DUAL DEGREE’ POSITIONS**

**FOR STUDENTS ENROLLED IN 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 assignment of 2 ‘Dual Degree’ positions for students enrolled in MSc Finance and Banking in the 2021/2022 academic year

**and DECLARES the following:**

1. to be regularly enrolled in MSc. Finance and Banking in the 2021/2022 academic year;
2. to not be included in the case for exclusion indicated in Art. 2 of the Call for Applications;
3. to have read the Call for Applications and to accept the conditions indicated therein;
4. to be aware that 42 CFU must be earned by 15/07/22 and 60 CFU must be earned at Tor Vergata by 09/09/22;
5. to intend to take the following courses at the host University during the 2022-2023 academic year:

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 Attached to this form is a copy of my valid identification document and privacy policy disclosure statement, as well as a copy of my complete transcripts 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 20 April 2022, with the object of the email as ‘***NAME + SURNAME** **– Finance and Banking – DUAL DEGREEE – Application**.

DECLARATION TO SUBSTITUTE CERTIFICATION

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

– Form for auto-certification –

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 regularly enrolled in the 2021/2022 academic year as a first-year student of MSc Finance and Banking which is a two-year programme (D.M. 270/04) at the School of Economics of Tor Vergata University of Rome.

I have attached to the present application form the following documents: valid ID, privacy policy disclosure statement and Delphi transcripts of exams taken by 18 February 2022.

-I have received and understood the Privacy Policy Disclosure in reference to Art. 13 of the EU Regulation 2016/679 on the processing of personal data pertaining to the assigning of 2 ‘Dual Degree’ positions for students enrolled in the 2021/2022 academic year in MSc Finance and Banking at Tor Vergata University of Rome. Moreover, I confirm that I am aware that my personal information will be processed in the manner and for the purpose indicated in the Privacy Policy Disclosure statement.

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

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 (complete and legible signature of name)