***Accademia Vivarium novum***

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| **Section 1: PERSONAL DETAILS** |

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| **Family name/Last name** (This is the name under which your file will be registered, so it must be complete and according to your official documents) **:** |

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| **Given name/First name:** |

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| **Title:** | **Date of birth: d/m/y** | **Place of birth:** | **Nationality:** |

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| **Address** (including P. O. Box)**:** |

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| **E-Mail address:** | **Telephone number:** (With international code) |

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| **Fax number:** (With international code) | **Mobile phone number:** (With international code) |

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| **Section 2: ACADEMIC AND LABORAL INFORMATION** |

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| **University/Faculty/School:** |

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| **Current occupation:** |

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| **Section 3: DISCLAIMER** |

**By sending this application form, I declare to agree:  
- with the rules and policies for life on the *campus*.  
- with the treatment of my personal data according to the Italian D.Lgs. 196/2003**

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| **Date and place:** | **Signature:** |