

I, the undersigned (name and surname) _____
born in (town/city and country) _____ on _____
Resident in _____
Address _____ house no. _____ Postal code _____
Italian fiscal code (*Codice Fiscale*) _____ (attach a copy of the fiscal code)
tel. _____ cell. _____
University e-mail address _____@student.unisi.it

REQUESTS

To apply for the **SOLIDARITY FUND 2017** established through the Notice relating to **Provision of the Registrar Index no. D.R. rep.346/2017 Register. No 35725 of 30/03/2017** for the following reasons indicated in art. 1 of the abovesaid Notice:

- 1) _____
- 2) _____
- 3) _____
- 4) _____

TO THIS END DECLARES

(pursuant to art. 46 and 47 of Presidential Decree 445/2000)

That the special and unforeseen circumstances arose during the course of university studies and represent a substantial and immediate impediment to the timely completion of said studies;

Matriculation no. _____

A.Y. _____ Year _____ (up-to-date with exams - not up-to-date with exams (*fuori corso*)/Repeating) Type of programme

Degree Programme in _____ Department of _____

Type of degree programme

- First cycle Degree/ Single cycle Degree under the old university system.
- Long single cycle degree programme
- Second cycle degree programme

that I am in default of payment of the following university fees and dues:

- a) _____ instalment a.y. _____ for a total of € _____ + late payment fee € _____
- b) _____ instalment a.y. _____ for a total of € _____ + late payment fee € _____
- c) _____ instalment a.y. _____ for a total of € _____ + late payment fee € _____

- that I have NOT applied for any special grant or other assistance of any type or nature from the Regional Authority for Higher Education Grants (ARDSU) or from other public or private institutes **for the academic years in which aid is requested from the Solidarity Fund Committee;**
- that I HAVE received a special grant or other forms of assistance from the Regional Authority for Higher Education Grants (ARDSU): indicate which and for which academic year _____
- that I understand** that assistance can be granted only in the form of exemption from payment of university fees and that further assistance for the same reasons is normally NOT granted;
- that I have NEVER received assistance from the Solidarity Fund Committee;
- that I HAVE requested and obtained assistance from the Solidarity Fund Committee in academic years _____
- that I understand** that the contribution cannot be granted to students who are recipients of other benefits from the University, the Regional Authority for Higher Education Grants (ARDSU) or other Italian or foreign institutions for the years in which assistance is requested from the Committee;

The following are attached hereto:

- Documents attesting to the family's financial situation in the academic years for which assistance is requested, as specified in art. 4 of the Notice;
- Documents attesting to the difficult circumstances indicated in the application, as well as the family's financial situation.

Siena, (date)

THE DECLARANT

I, the undersigned, am aware that false statements are punishable by law under art. 76 of the Penal Code and all applicable laws.

I, the undersigned, consent to the use of my personal data in accordance with Legislative Decree no. 196 of 30 June 2003 for the purposes of managing the selection procedure.

THE DECLARANT
