



**UNIVERSITÀ  
DI SIENA  
1240**

**Annex A Application form**

I, the undersigned (*name and surname*) \_\_\_\_\_, student no. \_\_\_\_\_

born in \_\_\_\_\_ Country \_\_\_\_\_ on \_\_\_\_\_

Resident in (*full address*) \_\_\_\_\_ Postal code \_\_\_\_\_ Country \_\_\_\_\_

tel. \_\_\_\_\_ cell. \_\_\_\_\_

e-mail (University account \_\_\_\_\_) @student.unisi.it

Aware of the penalties in the case of false declarations pursuant and consequent to articles 73 et seq. of Presidential Decree no. 445/2000,

**HEREBY DECLARE**

☐ that I am in arrears with payment of University fees and dues and I request total or partial exemption refers to the payment of fees and dues resulting on Segreteria on line

☐ that in AY 2024/2025 I WAS IN RECEIPT of **special funding or other benefits** of any nature or type from other **public or private institutes** (indicate which) \_\_\_\_\_;

☐ that I WAS IN RECEIPT of the Solidarity Fund in academic year(s) \_\_\_\_\_ for a total sum of \_\_\_\_\_;

☐ that I HOLD **another university qualification** of the same level as that of the course for which I am requesting access to Solidarity Fund 2025. Specify the qualification, University and date of award

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

**REQUEST**

that I be granted **ACCESS TO SOLIDARITY FUND 2025 – second round** due to the special or unexpected personal or family circumstances that have determined an immediate and substantial change to my personal and/or family finances and so that these circumstances do not represent an impediment to the regular progression of my university studies

**The circumstances are:**

☐ illness, personal or that of a parent or a member of the family unit;



**UNIVERSITÀ  
DI SIENA**  
1240

- ☐ serious accident or surgery, personal or to a parent or a member of the family unit;
- ☐ death of a member of the family unit or of a non-cohabiting sibling
- ☐ redundancy/unemployment/temporary redundancy of a parent or another member of the family unit;
- ☐ loss of the home of residence due to a judiciary proceeding for the forced recovery of credit
- ☐ difficult economic situation of the family (due to divorce, separation, ecc)
- ☐ area of residence affected by seismic events and/or natural disasters, provided that the resident home has been declared unfit for occupancy;
- ☐ disability less than 66% and other cases as specified in article 22, paragraph 3 of the Regulations for the calculation and payment of fees and dues for enrolment on courses at the University of Siena - academic year 2024/2025.
- ☐ other, specify \_\_\_\_\_

#### **I ATTACH**

**Letter to the Committee and analytical documentation** attesting to the grave personal, family or financial difficulties (NOTE: documentation – Annex B – must be submitted as a single file)

Date \_\_\_\_\_

Signed \_\_\_\_\_

I, the applicant, declare that:

1. I have read the notice and shall respect the provisions set out therein;
2. I am aware that data entered shall be processed for the institutional purposes of the interested administrations and may be communicated to public administrations in accordance with the law or regulations or in any case when required for carrying out institutional duties.

I, the applicant, authorize the University of Siena to process my personal data pursuant to EU Regulations 679/2016 governing the protection of personal data and Legislative Decree 196/2013 Privacy code, pursuant to art. 6 of the notice.

Date \_\_\_\_\_

The applicant \_\_\_\_\_