

**TRAINING AND ORIENTATION PROJECT (Curricular)
FINAL EXAMINATION**

APPLICANT'S PERSONAL DATA

Surname and name: _____
Matricule number: _____
Tax code: _____
Born in: _____
Date of birth: _____
Domiciled in: _____
Telephone: _____
E-mail address: _____
(tick if disabled person) ☐ yes ☐ no

CURRENT STATUS OF APPLICANT

Student enrolled in _____ year of Master's Degree Course in _____
Credits acquired _____ Year of enrolment (First enrolment) _____ / _____

HOST DATA (UNIVERSITY STRUCTURE)

Department: _____
Laboratory: _____
University/CNR tutor: _____
Name: _____ Surname: _____
Phone office: _____ E-mail address: _____
Period of activity: from _____ to _____
Credits to be achieved: final examination _____
for a total of _____ hours.
☐ Eventual period abroad* Host Institution _____
Duration _____

* Any ECTS carried out abroad are considered recognized as Erasmus credits if and only if the student participating in the Erasmus Call is eligible in the ranking (even if he is not a scholarship holder)

FINAL EXAMINATION OBJECTIVES AND MODALITIES

The undersigned trainee declares that he/she has read the obligations of the trainee, the information concerning insurance coverage during the traineeship period and the procedure for requesting changes to all the data in this document.

PERSONAL DATA PROTECTION

The University of Calabria, owner of the data processing, pursuant to Legislative Decree no. 196 of 30 June 2003 - "Codice in materia di protezione dei dati personali" informs that, in accordance with art. 13 of the same Legislative Decree, the personal and identification data provided will be used for the fulfilment of the obligations connected to this procedure and, subsequently, collected in databases and processed by electronic means by the competent offices. It should be noted that all data provided will be processed exclusively for the purpose of fulfilling legal requirements, for the administrative management of the interested parties.

Date: _____

Signature of Applicant

Signature of Supervisor

Signature of the Director of the Department
