

Prot. n. _____ del _____

Modulo CERT

DIREZIONE DIDATTICA E SERVIZI AGLI STUDENTI

UNIVERSITÀ DI PISA

Dottorati di ricerca

Largo Bruno Pontecorvo 3 56127 Pisa (fax 050 2210620)¹

Subject: **Request for certificates. Doctoral Programme in** _____
(enrollment code _____)

Surname _____ name _____

date of birth ____/____/____ place of birth _____

country of birth _____ Citizenship _____²

Address for any communication

_____ (indicate the name of the hosting family, if any)

city _____ prov. _____ postal code _____

address _____ n. _____ mobile _____

phone number _____ phone number _____

e-mail address _____@_____

According with and for the effects of d.p.r. n.445/00
I REQUEST the issuing of n. _____ certificates (maximum 3):

[tick ONLY the items that you need]

- * of enrollment
 - ☐ ordinary
 - ☐ indicating the amount of the grant
- * of completion of the course
 - ☐ date and outcome of final exam
 - ☐ with indication of the thesis title
- * other³

☐ for use abroad [TICK ONLY IF RELEVANT]

☐ in the English language [TICK ONLY IF RELEVANT]

I also ask that such certificates:

[tick only one of the following items]

- ☐ be sent to the following address:
city _____ prov. _____
Postal Code _____ address _____ n. _____
- ☐ they can be picked up in person at the desk
- ☐ they can be picked up at the desk by Mr. / Ms. _____
(date of birth _____ place of birth _____
- Data of the identity document of the delegating person _____)
- ☐ They can be sent as an attachment to the ticket open via the virtual desk
(<http://sportellovirtuale.unipi.it/>)

Date _____

Signature _____

¹ If sending by fax or by mail enclose a photocopy of a valid ID.

² In case of NEW RESIDENCE, indicate it here: _____.

³ Specify what should be indicated in the certificate.