



IN AGREEMENT WITH "DANTE ALIGHIERI" SOCIETY



ITALIAN LANGUAGE COURSES FOR FOREIGNERS

**APPLICATION FORM**

**The application must be completed in ALL parts**

COURSE LEVEL \_\_\_\_\_ NORMAL  INTENSIVE

NAME AND SURNAME \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ NATIONALITY \_\_\_\_\_ SEX  M  F

RESIDING IN \_\_\_\_\_ N. \_\_\_\_\_

CITY \_\_\_\_\_ PROV. \_\_\_\_\_ C.A.P. \_\_\_\_\_

STATE \_\_\_\_\_ TEL. \_\_\_\_\_ CELL. \_\_\_\_\_

E-MAIL \_\_\_\_\_

**Attached are the following documents:**

- Photocopy of identity card or passport (for children under 18 a picture and declaration of truth signed by a parent).
- A copy of receipt of the tuition fee paid by bank transfer on bank account held at **Accademia Musicale Romana c/o Credito Valtellinese Ag. 2 Roma - Viale Sirtori, 76 - 00149 - Roma - IBAN: IT78I052160320200000000 1161 - BIC(SWIFT): BPCVIT2S**  
**Reason: Contribution Course Italian Language**

**I hereby authorize the processing of personal data in accordance with local regulations concerning the protection of privacy by the Accademia Musicale Romana.**

Date, \_\_\_\_\_

Signature of candidate \_\_\_\_\_

Signature of a parent for minors \_\_\_\_\_