

**AUDITOR APPLICATION FOR  
"SOUND ENGINEERING COURSE"**

**ACCADEMIC YEAR 2014/2015**

**TO THE DEAN OF  
DISMI  
VIA G.AMENDOLA 2  
42122 REGGIO EMILIA**

The undersigned, took note of the provisions of the call of admission ,

**ASKS**

To be enrolled in the abovementioned course as auditor for the academic year 2013/2014.

As stated in art. 46 del D.P.R. n. 445 of 28/12/2000 and aware that those who declare false will invalidate the benefits and incur the penalties provided for false statements (artt. 75 e 76 del D.P.R)

**DECLARE UNDER HIS/HER RESPONSABILITY AS FOLLOWS:**

Fiscal Code \_\_\_\_\_

Last name and Name \_\_\_\_\_

Date of birth \_\_\_\_\_

Place of birth \_\_\_\_\_

Citizenship \_\_\_\_\_

Residence \_\_\_\_\_

Domicile (if different from residence)

Telephone Number \_\_\_\_\_

Mobile N. \_\_\_\_\_

E mail address \_\_\_\_\_

Degree (Bachelor/Master/Doctorate, please specify)

in \_\_\_\_\_

date (dd/mm/yy)

University of \_\_\_\_\_

vote \_\_\_\_\_

Place and date \_\_\_\_\_

Signature \_\_\_\_\_

Attachment:

1. Curriculum vitae

Personal data will be processed as stated in D.L. 30/6/2003 n. 196 (Codice in materia di protezione dei dati personali).