



To the Rector of
Politecnico di Milano
P.zza L. Da Vinci, 32
20133 – Milan (IT)

Application for extraordinary grant

The undersigned _____
(Name) (Surname)

Born on _____ in _____ prov _____

Resident in _____ Post code _____
Address _____ prov. _____

Matricula n. _____ mobile _____

Tax code _____ PoliMi e-Mail _____

Enrolled at Politecnico di Milano in

Bachelor of Science

Master of Science degree

PHD

School of _____

REQUESTS

the extraordinary grant for the reasons listed below (*please supply a brief description of the reasons you are requesting the grant for*)

In accordance with Article 3 of the Regulation concerning the extraordinary grants the following documentation is attached to the application

[N.B.: The documents supplied by foreign students must be legalised by the Italian diplomatic mission or consular authorities abroad. A translation into Italian, certified to be true to the original and issued by the competent diplomatic mission or consulate - or by an official translator - must be provided for all documents].

In accordance with D.P.R. n° 445/2000 the undersigned declares the below signature is original

In witness thereof

Milan,

(student's signature)

Upon applying for the assignment of the extraordinary grants, I declare to have fully read the information in accordance with art. 13 of the Regulations UE 2016/679 published on the website www.polimi.it/privacy/ and to consent to the processing of personal data, including the particular data.

Milano,

(student's signature)