



UNIVERSITÀ
DEGLI STUDI
DI TERAMO

FONDAZIONE
UNIVERSITÀ DEGLI STUDI
DI TERAMO



APPLICATION FORM

*Al Magnifico Rettore
dell'Università degli Studi di Teramo
c/o Fondazione Università degli Studi di Teramo*

First Name _____ Last Name _____

Date of birth _____ Sex M or F _____

Place and Country of Birth _____

Nationality _____

Address _____ Telephone number _____

e-mail _____

Education

Higher Education

Years attended: from _____ to _____

Institution (name, place, country) _____

University Education

Years attended: from _____ to _____

University (name, place, country) _____

Major Subjects of Study _____

Degree obtained (include certification of university degree) _____

Post-University Education

Years attended: from _____ to _____

Institution/University (name, place, country) _____

Major Subjects of Study _____

Title obtained/expected _____



KNOWLEDGE OF LANGUAGES

English excellent good sufficient

French excellent good sufficient

Other languages

..... excellent good sufficient

..... excellent good sufficient

..... excellent good sufficient

PROFESSIONAL EXPERIENCE (place, duration, job description)

.....
.....

OTHER RELEVANT INFORMATION

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.....

REASONS FOR APPLYING

Please include a letter of intent containing the reasons of interest for participation in this Master Programme.

REQUESTS

to be **admitted** to the 2nd level Master in "INTERNATIONAL CO-OPERATION AGAINST TRANS-NATIONAL FINANCIAL ORGANIZED CRIME" for the academic year 2007/2008.

I enclose:

- curriculum vitae;
- legalized copy of university degree certificate, containing the exams sustained and the final evaluation mark or, alternatively, only for Italian candidates, an *autocertificazione sostitutiva* according to DPR 445/2000. For graduating students, the university enrolment certificate with the exams sustained is necessary or an *autocertificazione sostitutiva*;
- any other title or publication;
- copy of a valid identification document;
- payment receipt of € 20.00 - not reimbursable – on the bank account (c.c.p.) n° 45312733 registered to Università degli Studi di Teramo, covering the Master admission costs.

To be sent by e-mail or fax by the 10th of DECEMBER 2007 to:

mcgiannini@unite.it or +39.0861.266619

AND

by registered post to:



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Magnifico Rettore dell'Università di Teramo
c/o Fondazione Università di Teramo,
Viale Crucoli, 122- 64100 Teramo

REFERENCES

Please include at least one letter of reference from a University Professor, a legal practitioner or a representative of an institution or organisation containing full indication of the name, address and telephone number of the author of the letter.

DATE _____

SIGNATURE _____