**VISITING STUDENT**

**APPLICATION FORM FOR TRAINEESHIP AT UDINE UNIVERSITY**

**Academic Year *yyyy / yyyy***

|  |  |
| --- | --- |
| The undersigned  | *(name and surname)*  |
| Date of birth  | *(dd / mm / yyyy)* |
| In  | *(city)* |
| In | *(Country)* |
| Citizenship |  |
| N. identity card/passport |  |
| Telephone/cell., e-mail |  |
| Home University |  |
| Home University’s Tutor  | *(name, surname and e-mail)*  |
| Applying for a Traineeship VISA for Italy | *(yes/no)* |

**APPLIES TO HAVE ACCESS TO A PERIOD OF TRAINEESHIP AT UDINE UNIVERSITY**

|  |  |
| --- | --- |
| Department/Office UNIUD, at which the Traineeship is requested: |  |
| Disciplinary area of interest |  |
| Aims and motivation of the Traineeship at UNIUD: |  |
| Activities of your interest during the Traineeship at UNIUD: |  |
| In possession of Erasmus Scholarship for the Traineeship  | *(yes / no)* |
| In possession of other type of Scholarship for the Traineeship | *(yes / no)* |
| Do you have a Tutor at UNIUD?If yes, his/her personal details are the following  | *(yes / no)* (*name, surname and e-mail)*  |
| Traineeship’s duration at UNIUD |  |
| In possession of the Insurance policy for the Traineeship | *(yes / no)* |

**ATTACHEs TO THE APPLICATION THE FOLLOWING DOCUMENTATION:**

* Enrolment at the Home University Certificate
* Curriculum Vitae
* Copy of valid identity document
* Other (Foreign Qualifications, Erasmus Scholarship Certificate for Traineeship or other Scholarships etc.)

󠄀 Furthermore, the undersigned declares to be informed, in accordance with art. 13 of the Regulation (EU) 2016/679, that the collected personal data will be processed, also using computer tools, in the respect of the process, which this application is submitted for and in the resulting administrative procedures, according to the circular available in the page “Privacy” of the website of the University of Udine, together with its possible reviews, accessible from the homepage [www.uniud.it](http://www.uniud.it)

**PLACE, DATE APPLICANT’S SIGNATURE**