

APPENDIX A

APPLICATION FOR REGISTRATION_MASTER PROGRAM 2023-24
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PERSONAL INFORMATION

THE UNDERSIGNED	
NAME	
SURNAME	
DATE OF BIRTH	
PLACE OF BIRTH	
CODICE FISCALE OR SOC. SEC.	
CITIZENSHIP	
ADDRESS AT RESIDENCE	
ZIP CODE AND CITY	
FIXED PHONE LINE AND CELLULAR	
EMAIL ADDRESS	

DEGREES HELD

LAST DEGREE HELD	
FINAL GRADES	
THESIS TITLE AND SUBJECT	
CRITIC AND SUPERVISOR	
UNIVERSITY	
OTHER GRADUATE PROGRAMS COMPLETED	

REQUESTS

TO BE ADMITTED TO THE "MASTER ITINERANTE IN ARCHITETTURA E MUSEOGRAFIA PER L'ARCHEOLOGIA. PROGETTAZIONE STRATEGICA E GESTIONE INNOVATIVA DELLE AREE ARCHEOLOGICHE"

NOTE

<p>Calendar changes (in terms of dates and/or places) may need to be made for circumstances beyond our control. The Adrianea will communicate these changes when necessary within 30 days of the beginning of the workshop.</p>
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CITY DATE

SIGNATURE

Accademia Adrianea di Architettura e Archeologia onlus

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