

MASTER IN INDUSTRIAL DESIGN FOR ARCHITECTURE

Please consider that all the fields marked with * must be filled otherwise it will be impossible to take into consideration the application

Personal details

Family Name * _____

First Name * _____

Tax Code (Italian) * _____

Place and Date of Birth * _____

Citizenship(s)* _____

Status _____ Sex M/F* _____

Military service _____

Permanent Residence

Address * _____

City * _____ Country * _____ Zip code * _____

Telephone * _____ Mobile * _____

E-mail address * _____

Address in your Country (if different from the permanent one)

Address * _____

City * _____ Country * _____ Zip code * _____

Telephone * _____ Mobile * _____

E-mail address * _____

Work Address

Company name* _____

Address * _____

City * _____ Country * _____ Zip code * _____

Telephone * _____

Academic background

High School * _____

City * _____ Country * _____

Final marks (please indicate grading system; e.g. 78/100, GPA (4.25/5) , etc) * _____

Diploma/Degree qualification title * _____

Diploma/Degree Date * _____

Start date (month-year) * - End (month-year) * _____

Name of University * _____

City * _____ Country * _____

Final marks (please indicate grading system; e.g. 78/100, GPA (4.25/5) , etc) * _____

Diploma/Degree qualification title * _____

Diploma/Degree Date * _____

Start date (month-year) * - End (month-year) * _____

Courses and Educational seminars

Published Works

Languages skills

Level

	<i>mother tongue</i>	<i>excellent</i>	<i>good</i>	<i>basic</i>	<i>insufficient</i>
Italian *	•	•	•	•	•
English *	•	•	•	•	•
Other language	•	•	•	•	•
Other language	•	•	•	•	•
Other language	•	•	•	•	•

Travels abroad (please state place, period and reasons):

Professional background:

Company name * _____ Company profile* _____

Role* _____ Functional area* _____

Start date* _____ Qualification* _____

Describe your current activities and responsibilities* _____

Foreign languages used during professional activities * _____

In case you decide to attend the master

- Your company intends to finance the master
- Your company allows a leave of absence
- Job interruption
- Relation to be defined

Previous professional experiences (following a chronological order starting from the most recent)

Company name _____ Sector/Industry _____

Role _____

Place _____ Period (From –To) _____

Company name _____ Sector/Industry _____

Role _____

Place _____ Period (From –To) _____

Company name _____ Sector/Industry _____

Role _____

Place _____ Period (From –To) _____

Personal information

How did you hear of the master course? *

Article (please specify in which newspaper, magazine, etc.) _____

Internet (please specify in which website) _____

School/University (please specify in which one) _____

Careers Advisor (please specify which) _____

Mailing list (please specify by whom) _____

Italian Embassy or Consulate (please specify which one and where) _____

People suggestion (please specify whether a friend, teacher, etc.) _____

Other (please specify) _____

Why are you applying for this master program?*

What are your short-term goals (over the next 4 years)?

What are your long term goals (more than four years)?

Hobbies, cultural preferences and other interests

What are in your opinion the strongest and weakest points in your character?

I confirm that, to the best of my knowledge, the information given in this form is correct and complete

In demonstration of agreement to the use of personal data under Clause 11 of L. 675/96 and in confirmation of the communication made under Clause 10 of L. 675/96 (d. Lgs. 196/03)

• I agree

• I don't agree

Date

Applicant's Signature