

APPLICATION FORM

SELECTION FOR PARTICIPATION IN THE DOUBLE DEGREE INTERNATIONAL MOBILITY PROGRAM AND THE AWARD OF THE EUROPEAN MOBILITY SCHOLARSHIP FOR THE ACADEMIC YEAR 2024/25

INTER-UNIVERSITY MASTER'S DEGREE IN "ARTIFICIAL INTELLIGENCE & CYBERSECURITY"

To the Examination Committee

I, the undersigned, a student duly enrolled in the Inter-University Master's Degree program in ARTIFICIAL INTELLIGENCE & CYBERSECURITY and in compliance with the payment of university fees, request to participate in the selection process in order to undertake a period of study at the University of Klagenfurt.

SURNAME	FIRST NAME
Student ID NoEn	rolled in the year
Born in	Prov on
Residing in	Province ZIP Code
Address Phone	Email
For the purpose of financial contributions as per Article 9.4 of the University notice, the candidate attaches the ISEE 2024 certification. In the absence of the certification at the closing date of the call, undertakes to produce and send it to the email address didattica.dmif@uniud.it by June 30 2024.	
In accordance with Legislative Decree No. 196/2003 (Protection of individuals and other subjects with regard to the processing of personal data) and EU Regulation No. 2016/679 (General Data Protection Regulation - GDPR), I, the undersigned, declare that the personal data provided are correct and authorize their use for purposes allowed by law.	
Place and date	
Signature	·