

DECLARATION OF CONSENT FOR ADMISSION/ENROLLMENT OF UNDER-AGE STUDENTS TO COURSES OF STUDY AT THE UNIVERSITY OF PAVIA

	section must be completed by the legal guardian of the		by the sole parent exercising parental	
(Surname and Name)				
			th	
Country of residence		Street Address		
Type of document (Identity card/Passport)on		Tax Code (If available)	issued by	
I, the undersigned				
(Surname and Name)				
Country of birth	Place of birth	Date of bir	th	
Country of residence		Street Address		
			issued by	
*(The present Declaration mu legal guardian. Please specify		oth parents or by the sole parent ex	ercising parental authority or, failing this, by the	
□ exercising parental at□ as legal guardian of the	uthority as parents/carers one minor concerned	f the minor concerned		
(Surname and Name)				
Country birth	Place of birth	Date of birt	h	
Country of residence		Street Address	Street Address	
Type of document (Identity	card/Passport)	n. n	issued by	



DECLARE

-	That the minor (Name, Surname) has applied for
	admission/enrolment in a first -cycle degree course/single cycle degree course in
	at the University of Pavia;
	AND EXPRESS
-	the consent to the admission/enrollment and to the treatment of the minor's personal data (Name, Surname)in accordance with current legislation;
-	that I/we have read, understood and accept the treatment of personal data collected as part of the procedure
	for which this declaration is made, in accordance with the provisions of Regulation (EU) 2016/679, for the
	purposes of enrolment of the minor concerned and in the manner indicated in the information notice attached
	to the University web page: