

Conditional Enrollment Self-declaration

NAME:.....

SURNAME:.....

BORN IN (city and country):.....

BORN ON (dd/mm/yyyy):.....

BACHELOR'S DEGREE:.....

UNIVERSITY:.....

GRADUATION DATE (on final diploma):.....

I acknowledge that I have read and understood all the admission requirements as per Article 2 of the official Call For Applications ("Bando di concorso per l'ammissione al Master universitario di I livello in Human Resources and Organization").

I hereby confirm that:

- *I hold a university degree obtained abroad;*
- *I am aware that I must obtain the recognition of that qualification for the purposes of admission to the programme (as per Article 5 of the Call for Application);*
- *It is my responsibility to obtain the above mentioned recognition of the degree and that I must submit it to Master's Office of University of Bologna and Bologna Business School as soon as possible;*
- *The submission of the recognition of my qualification is a requisite to obtaining the 1st level Professional Master in 'Human Resources and Organization'.*
- *In the case that I do not present the recognition document and am therefore not awarded the 1st level Professional Master's title, I accept that all tuition fees paid are non-reimbursable;*
- *Subsequent to enrollment I will present to the Masters Office the residence permit, or copy of the receipt confirming the application for the permit (see Art. 5 of the Call for Application).*

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Date

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Signature