



UNIVERSITÀ
DEGLI STUDI
FIRENZE



TO THE RECTOR
of the University of Florence

Student Administration Office

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STUDENT NUMBER

STAMP DUTY €16,00 (to be paid virtually)

APPLICATION FOR ENROLMENT AS A PART-TIME STUDENT

THE UNDERSIGNED

surname and name _____ born on _____
 in _____ () country _____ Institutional e-mail address _____
 resident at street/square _____ n. _____ district/locality _____
 municipality _____ () postcode _____ mobile _____
 domicile (indicate only if different from residence) at _____ street/square _____ n. _____
 municipality _____ () C.A.P. _____

REQUESTS

TO BE ENROLLED FOR THE ACADEMIC YEAR ____ / ____ AS A PART-TIME STUDENT

requested in the academic year ____ / ____ at this University for the degree course in _____

FURTHER DECLARES TO BE AWARE THAT:

as a result of this act and if the educational requirements set out in the 'Regulations for students engaged in part-time educational activities (part-time students)', issued by Rector's Decree No. 1045 of 26 August 2022 (https://www.unifi.it/sites/default/files/migrated/documents/regolamento_studente_partime_2022.pdf), he/she will have to pay the portion of university fees for which he/she was exempted, using the appropriate payment slip issued by the Student Office.

(date)

(signature)

POLICY ON THE PROCESSING OF PERSONAL DATA

Data will be processed in accordance with EU Regulation 2016/679 concerning the protection of individuals with regard to the processing of personal data, and D. Leg. 196/2003 and ss.mm.ii. All information regarding the processing carried out and the exercise of the rights of data subjects on the protection of personal data can be found on the University https://www.unifi.it/sites/default/files/2025-10/informativa_studenti_ott_2025.pdf.

(signature for acknowledgment)