Politecnico di Torino
Direzione Studi
Ufficio Carriere
C.so Castelfidardo, 39 10129
Torino

STAMP

16,00 euro

AT THE APPLICANT EXPENSE

Application for Duplicate Certificate of Title

Undersigned_____ _____
Surname *Name*

born in_____ (_____) on_____

student number _____ graduated in ❒ Architecture ❒ Engineering on _____

licensed to practice on ❒ First ❒ Second session of year _____

The applicant, aware of the existing false declaration penalty and the consequent benefit loss as established in art. 75 e 76 of D.P.R. 28/12/2000 n. 445,

DECLARES THAT:

❒ Certificate of Graduation ❒ License to Practice Certificate ❒ Specializing Master

has been lost / damaged / stolen.

Herewith, a duplicate of the aforementioned document is requested.

Attached:

- **ID card/Passport photocopy.**
- **Payment receipt of € 100,00 (to Politecnico di Torino)**

The applicant declares him/herself aware that personal data will be treated, in accordance with legislative decree 196 of 30 June 2003 (art. 18 e 19), also with IT tools, and only for purposes related to this application.

_____ _____
(date) (Signature)

_____
Applicant's phone number or e-mail for communications