

## **SUBSTITUTE DECLARATION OF SELF CERTIFICATION**

Made pursuant to art. 46 of the Presidential Decree 28.12.2000 No.445.

### **Simultaneous enrollment in another Degree Program**

*Completion of this form is required only if you are already enrolled in a university Degree Program and if you intend to enroll in a second Course pursuant to Law no. 33 of 12 April 2022 and Ministerial Decree 930 of 29 July 2022.*

### **INSTRUCTIONS FOR FILLING THE FORM**

Fill out this form in all its parts, print it, sign it with a handwritten signature, scan it and save it on your device.

Send it via email, from your institutional email address to the Registrar Offices of the Courses concerned, indicating in the subject "Declaration of simultaneous enrollment in another Degree Program", and attaching the filled and signed form.

### **PROCESSING OF PERSONAL DATA**

European legislation, Reg. (EU) 2016/679, and Italian legislation, Legislative Decree 30 June 2003, No. 196 and subsequent amendments and additions, as well as the provisions of the Italian personal data protection authority applies to the processing of personal data provided in this form.

The personal data provided are processed exclusively for the purposes of managing this form and are collected at the University of Gastronomic Sciences (UNISG) – Students Registrar Office, through IT procedures and paper filing of the related documents.

The data subjects may exercise the rights referred to the aforementioned legislation, including the right of access to data concerning him, as well as some complementary rights including the right to rectify, update, integrate or delete erroneous, incomplete data collected in terms of its non-compliance with the law.

False or incomplete declarations are subject to criminal prosecution pursuant to Art. 76 of the Presidential Decree 445/2000.



To the Rector of the University of Gastronomic Sciences

The undersigned \_\_\_\_\_  
*Family Name* *First Name*

Born on \_\_\_\_\_ in \_\_\_\_\_

Italian Fiscal Code \_\_\_\_\_

Student Identification Number \_\_\_\_\_

### **DEGREE PROGRAM 1**

I declare that I am currently enrolled in one of the following Program:

- ☐ Undergraduate Degree
- ☐ Master's Degree
- ☐ Single cycle Degree program
- ☐ First level master
- ☐ Second level master
- ☐ Ph. D.
- ☐ Medical specialization
- ☐ Non-medical specialization
- ☐ Afam Course (Institutes of High Training in Art, Music and Dance)

At:

- ☐ UNISG
- ☐ Other Italian university/institute
- ☐ Foreign University

University name and location (if different from UNISG):

\_\_\_\_\_

Name of the Study Program in which you are enrolled:

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Degree class/code (only for Undergraduate Degree, Master's Degree and Single cycle Degree programs)

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Year of course in which you are enrolled.

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The course in which I am enrolled requires compulsory attendance.

☐ Yes ☐ No

And I wish to enroll in the following second Study Program for the same Academic Year (also following a transfer from another UNISG course or transfer from another Italian university)

## **DEGREE PROGRAM 2**

- ☐ Undergraduate Degree
- ☐ Master's Degree
- ☐ Single cycle Degree program
- ☐ First level master
- ☐ Second level master
- ☐ Ph. D.
- ☐ Medical specialization
- ☐ Non-medical specialization
- ☐ Afam Course (Institutes of High Training in Art, Music and Dance)

At

- ☐ UNISG
- ☐ Other Italian university/institute
- ☐ Foreign University

University name and location (if different from UNISG):

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Name of the Study Program you wish to enroll

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Degree class/code (only for Undergraduate Degree, Master's Degree and Single cycle Degree programs) \_\_\_\_\_

The program I am going to enroll requires compulsory attendance ☐ Yes ☐ No



Please attach the Study Plan of the course for which the simultaneous enrollment request is being submitted (only for Bachelor's Degree, Master's Degree, Single-Cycle Master's Degree)



### **I DECLARE**

- ☐ to be aware that until the official verification of the compatibility requirements between the two Courses indicated, I will be enrolled conditionally in the second Course;
- ☐ that I meet the access requirements for the Course I wish to enroll;
- ☐ to be aware of the constraints and assumptions established by Law no. 33 of 12 April 2022 and of Ministerial Decree 930 of 29 July on the simultaneous enrollment in two study courses.

### **I FURTHER DECLARE**

to choose as a reference Course for the benefits of the Right to university study:

- ☐ Course n. 1

or

- ☐ Course n. 2 (not valid if you are enrolled in Course 1 for years subsequent to the first)

Signature

Pollenzo, (date) \_\_\_\_\_

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