

Accademia di belle arti G. Carrara P.zza Carrara 82/D - 20124 Bergamo www.accademiabellearti.bg.it

International Relations OfDice: prof. **Bianca Trevisan** erasmus.accademia@poliartibg.it

## **INCOMING STUDENTS APPLICATION FORM**

STUDENT'S PERSONAL DATA	
SURNAME (FAMILY NAME):	NAME:
NATIONALITY:	DATE OF BIRTH:
IDENTITY CARD N.:	PASSPORT N.:
HOME ADDRESS:	CITY:
HOME PHONE:	MOBILE PHONE:
EMAIL:	

SENDING INSTITUTION	
NAME AND ERASMUS CODE:	FULL ADDRESS:
STUDY DEPARTMENT	EXCHANGE PERIOD(autumn semester; spring semester, whole year):
DEPARTMENTAL COORDINATOR (NAME, TELEPHONE, EMAIL):	
DEPARTMENTAL COORDINATOR'S SIGNATURE:	DATE OF SIGNATURE:



Politecnico delle Arti di Bergamo

LANGUAGE COMPETENCE
MOTHER TONGUE:
ITALIAN (LEVEL):
OTHER LANGUAGES (LEVEL):

## Documents required at your arrival: - 2 identity photos - identity card or passport - Learning Agreement

DATE:	SIGNATURE: