



STUDY TRACK CHANGE FORM

To the Rector of the University of Padua

I, the undersigned (*first name - last name*) _____ Student ID _____

born in (*city – country*) _____ on (*date*) _____

phone number _____ e-mail address _____

enrolled in the academic year _____ in _____ year of the:

Degree programme's name: _____

Study track's name: _____

ASKS to continue his/her studies in the following

study track: _____

I also declare that, pursuant to art.13 of EU Regulation 2016/679 (General Data Protection Regulation), I am aware that the personal data collected will be exclusively processed, also through IT tools, within the procedure for which I am hereby applying, as it is specified at <http://www.unipd.it/privacy>

_____ (*place*), _____ (*date*) (*Name and Surname*) _____