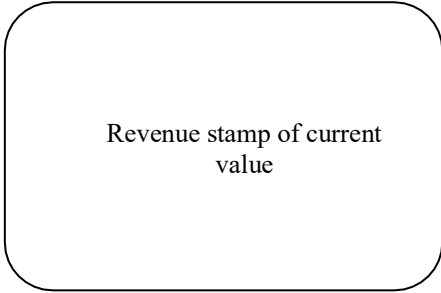


**REPLACEMENT DIPLOMA  
APPLICATION FORM**

To the Rector of the  
University of Padua



Student ID \_\_\_\_\_

I, the undersigned,

born in

on

residing in

Prov. Postcode

address

no.

e-mail

tel. no.

mobile no.

with a degree in

awarded on

by this University,

apply for the replacement diploma.

For this purpose and pursuant to art. 47 of the Decree No. 445/2000 of the President of the Republic, being aware of the criminal sanctions applicable in the event of false declarations pursuant to art. 76 of the aforementioned Decree, I declare that:

- I have lost the original diploma
- the original diploma, that I enclose herewith, is damaged

I enclose the receipt of payment for the issue of a replacement diploma.

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 within the procedure for which this statement is made, as it is specified at <http://www.unipd.it/privacy>

-

^

(Place)

(date)

(Signature)