

## AUTHORISATION TO SHIP THE ORIGINAL DIPLOMA

To the Rector of the  
University of Padua

I, the undersigned,

born in

on

tel.no.

mobile no.

graduated in

on

/

/

, student ID

,

authorise, on my own responsibility, the Student Office to ship the original diploma to the following address:

Surname\_

name

Address\_

no.\_

Postcode\_

Town/City

PROV.( \_ )

Hamlet

email\_

I enclose herewith copy of my ID card (mandatory)

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)