



UNIVERSITÀ  
DEGLI STUDI  
DI PADOVA

**APPLICATION FOR ASSESSMENT OF THE MINIMUM  
CURRICULAR REQUIREMENTS  
AND ASSESSMENT OF ADEQUATE PERSONAL  
KNOWLEDGE  
- FOREIGN STUDIES -  
MASTERS DEGREES**



<b>Personal information</b>	<p>I the undersigned _____  Family name _____ First name _____</p> <p>Born in _____ ( _____ ) on _____  place country date of birth</p> <p>Citizenship _____ Tax code _____  if not Italian</p> <p>Address _____</p> <p>Postal code _____ City _____ ( _____ )  country</p> <p>Telephone number _____ mobile phone _____</p> <p>e-mail _____ @ _____  use capital letters</p>
<b>Secondary school diploma</b>	<p>Secondary school diploma _____  name of certificate or diploma obtained</p> <p>Date _____ with a final grade of ____ / ____</p> <p>Country _____</p> <p>Years of school attendance _____  information to be found in the "Dichiarazione di valore"</p> <p><input type="checkbox"/> Gives legal access to the chosen University degree course</p> <p><input type="checkbox"/> Does not give legal access to the chosen University degree course</p>
<b>Foreign university degrees/ certificates of higher education</b>	<p><input type="checkbox"/> degree <input type="checkbox"/> exams passed without obtaining a degree</p> <p>University _____</p> <p>Faculty _____</p> <p>Name of course _____</p> <p>Date of degree _____ final grade ____ / ____  (to be completed if the degree has been obtained)</p> <p>Legal duration of the degree _____  as indicated in the "Dichiarazione di valore"</p>

**REQUEST**

the "Commissione pratiche studenti" to evaluate my academic credentials for Second-cycle degree (Master)

Curriculum \_\_\_\_\_ branch \_\_\_\_\_  
if provided if different from Padua

**PRIMARY PURPOSE OF THE EVALUATION:**

- ☐ APPLICATION FOR ADMISSION TO THE COURSE, WITH A REDUCTION, OR RECOGNITION OF EQUIVALENT CREDENTIALS, according to the number of ECTS acknowledged
- ☐ FURTHER VALIDATION\* (students of the University of Padua who are already enrolled in the University degree for which evaluation of credits is requested. Please indicate your Student identification number here \_\_\_\_\_)

\* Validation and acknowledgement in the on-line "libretto" will be carried out automatically by the **Segreteria Studenti**

In this page, please list: – Exams with relative dates and marks, ECTS if available, and number of teaching hours. AND/OR: – Other training activities – including non-university activities (professional training courses, seminars, internships, jobs)						To be completed by the Board for the Management of student files  <div style="text-align: center;">_____</div> Course Board				
Valid. rank	Date	Exam/training activity	Mark	ECTS	Hours	The Exam/training activity is acknowledged for (Reference to the academic year of the acknowledged exam/training activity: 20__/20__)	Mark	ECTS	Valid. rank	Upon integration of
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SURNAME\_\_\_\_\_

NAME\_\_\_\_\_

<p><b>In this page, please list:</b></p> <ul style="list-style-type: none"> <li>– Exams with relative date and mark, ECTS if available, and number of teaching hours AND/OR:</li> <li>– Other training activities – including non-university activities- (professional training courses, seminars, internships, jobs)</li> </ul>						<p><b>To be completed by the Board for the Management of student files</b></p> <p>_____</p> <p><b>Course Board</b></p>				
Valid. rank	Date	Exam/training activity	Mark	ECTS	Hours	The Exam/training activity is acknowledged for (Reference to the academic year of the acknowledged exam/training activity: 20 __/20 __)	Mark	ECTS	Valid. rank	Upon integration of
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SURNAME \_\_\_\_\_

NAME \_\_\_\_\_

Exams to be listed if not taken yet/ongoing training activities at the moment of application. These exams/activities are expected to be taken/finished at the moment of enrolment in our course.				To be completed by the Board for the Management of Student Files			
				Course Board			
Validation rank	Exam/training activity (Admission to the course year selected and ECTS validation will come into force only after these exams/training activities have been confirmed and recorded)	ECTS	Discipline sector	The Exam/training activity is acknowledged for (Reference to the academic year of the acknowledged exam/training activity: 20__/20__)	ECTS	Validation rank	Upon integration of
A1							
A2							
A3							
A4							
A5							
A6							
<p>I hereby declare that I <b>have/have not</b> applied for other evaluations for the academic year 20__/20__.</p> <p>The interested party declares that all above-mentioned information is true, pursuant to sections 46 and 47, D.P.R. 445/2000, regarding equivalent declarations of certification and sworn statements; he/she is aware of penal sanctions as per section 76 D.P.R. 445/2000, in the case of false information and falsification of records.</p> <p>Documents to be attached to the evaluation application:</p> <ul style="list-style-type: none"> <li>copy of secondary school diploma, translated and legalised by the Italian Embassy with a "Statement of Validity".</li> <li>copy of university degree (or diploma of post-secondary studies), translated and legalised by the Italian Embassy with a "Statement of Validity" (where applicable).</li> <li>copy of official transcript of records.translated and legalised.</li> <li>copy of every exam programme, translated and legalised.</li> <li>copy of document of identification</li> <li>Non-EU students: copy of valid visitors' permit of stay</li> <li>payment of administration fees <b>IF</b> another evaluation was submitted to our university in the current year</li> <li>other documents _____</li> </ul> <p>Padova, _____ Signature _____</p> <p><b>Information regarding personal data pursuant to section 13, D.Lgs. 30<sup>th</sup> June 2003, n.196:</b>  The University of Padua declares that personal details of the interested party will be used only for administrative purposes – computerised use included – for the requested practice (ref. to rights of the interested party pursuant to section 7, D.Lgs. 196/2003).</p>				<p>Given our educational offer for the academic year _____</p> <p>We hereby approve    <input type="checkbox"/> <b>admission</b> to the _____ year    <input type="checkbox"/> <b>equivalence</b></p> <p>University degree                      Second- level (master)</p> <p>In _____</p> <p>With validation of the above-mentioned training activities for _____ ECTS</p> <p><b>The applicant will/will not need to take an admission test</b></p> <p><b>With regard to second level degree, the applicant</b></p> <p><input type="checkbox"/> <b>Has</b> minimum curricular requirements    <input type="checkbox"/> <b>does not</b> have the minimum curricular requirements</p> <p><input type="checkbox"/> Has a suitable graduation mark                      <input type="checkbox"/> does not have <b>asuitable</b> graduation mark</p> <p><b>Notes:</b> _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>On resolution</b> of the Board for the Management of Student Files, _____ date</p> <p>For the Board: _____</p> <p style="text-align: right;">signature of the person in charge</p>			

SURNAME \_\_\_\_\_

NAME \_\_\_\_\_

