

Conditional Enrollment Self-declaration

NAME:.....

SURNAME:.....

BORN IN (city and country):

.....
.....

BORN ON (dd/mm/yyyy):

.....

BACHELOR'S DEGREE:

.....

UNIVERSITY:.....

.....

GRADUATION DATE (on final diploma):.....

I acknowledge that I have read and understood all the Master in Human Resources and Organization admission requirements as per Article 2 of the official Call ("Call for Applications for admission to the Professional Master's Programme (1st level) in Human Resources and Organization").

I hereby confirm that:

- *I hold an university degree obtained abroad;*
- *I am aware that I must obtain the recognition of that qualification for the purposes of admission to the Master programme (as per Article 4 of the Official Call);*
- *It is my responsibility to obtain the above mentioned recognition of the degree and that I must submit it to the international office as soon as possible;*
- *The submission of the recognition of my qualification is a requisite to obtaining the 1st level Professional Master in Human Resources and Organization;*
- *In the case that I do not present the recognition document and am therefore not awarded the 1st level Professional Master's title, I accept that all tuition fees paid are non-reimbursable;*
- *Subsequent to enrollment I will present to the Masters Office the residence permit, or copy of the receipt confirming the application for the permit (see Art. 12 of the Official Call).*

.....

Date

.....

Signature

[PLEASE SEND BACK VIA E-MAIL TO humanresources@bbs.unibo.it]