



REGISTRATION FOR INDIVIDUAL COURSES

TO THE PROVOST

I, the undersigned _____

born in _____ on _____

registered at / an alumnus/a of _____ University

in the _____ degree program

DECLARE

that I would like to enroll in the following individual courses for the _____ academic year

Course	Professor	Department

To that end, I attach: a receipt for payment of €1,300.00 for each course that I would like to take; a photocopy of my identification document; two passport-sized photos (one of which has been authenticated for non-EU students); the certificate of registration/graduation listing the exams I have taken.

Date _____

Signed _____

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