

APPLICATION FORM
FOR THE SPECIALIZATION COURSE (2 years)
To be presented within the 28 febbraio 2009

To the Head Teacher
of the
ISTITUTO STATALE d'ARTE per la Ceramica "G. Ballardini"
C.so Baccarini, 17 - 48018 Faenza (RA) - Italia

The undersigned _____

born in _____ (_____) the (date/year) _____

living at (town) _____ in (address) _____ n° _____

Tel _____ mobile ph _____ email _____

Asks to enter in the school year **2009/10** in the Course of:

- "SPECIALIZATION COURSE IN CERAMIC ART CERAMIC TECHNIQUES"
 "SPECIALIZATION COURSE IN CERAMIC RESTORATION"

I declare to have got the following diploma or degree _____

I declare

- not to have presented anyother application forms to any other school
- to know that these data can be used by the school "Ballardini" (Legge 31/12/96, n. 675 "Tutela della privacy" - art. 27).

I enclose and attach hereby

- receipt of payment of **€ 223,00** on the bank account **BIC ICRAITMMF20 – IBAN IT14U085422370000000044116 "I.S.A. G. BALLARDINI – C.so Baccarini, 17 – 48018 Faenza (RA)", ITALY.**
- diploma or degree or any kind of school certificate
- n. 2 photographs (for documents)

If not in possession of a specific diploma in ceramics or arts I will send my school certificate with programs and subjects within 10 june 2009

Date _____

Sign _____

The course will take place if the number of students is minimum 20 people