UNIVERSITÀ DEGLI STUDI DI MILANO BICOCCA

WITHDRAWAL FROM UNIVERSITY STUDIES

Student code n° .....

To the Rector of the University of Milan - Bicocca

I, hereby, (student full name) .....

Born in (student's place of birth) .....

On (student's date of birth) .....

REQUEST

to completely withdraw from the University studies undertaken in the Course/Study Programme .....

..... at the University of Milan – Bicocca,

being aware that such withdrawal from University studies is **irrevocable.**

The competent academic bodies will eventually evaluate any requests for CFU recognition, aimed at enrolling in Degree Programs provided by the Ministerial Decree 270/2004.

The student also declares ○ to have ◉ not to have any pending charges with CIDIS and / or with university libraries.

Upon enrolment, the student filed:

◉ **ORIGINAL DIPLOMA** (1)
○ **REPLACEMENT STATAMENT OF DIPLOMA** (1)
○ **SIMPLE STATEMENT**
○ **SELF-DECLARATION**

(1) these documents will be returned only to the person concerned, provided with a suitable ID. Alternatively, documents can be handed in to a person provided with the owner's authorisation approval (still owner's ID copy is required), within 10 days from the date of the withdraw from University studies request.

Milan, ...

.....
Student Signature

ADDRESS:

Street ..... n° ..... City and Country .....

Post code (C.A.P.) ..... Tel. ..... E-mail .....

Personal data will be processed in accordance with Legislative Decree n. 196 of 2003 (Code regarding the protection of personal data) and its subsequent amendments and additions, as well as the EU Regulation 2016/679 (General Data Protection Regulation). It is possible to access information at the following link https://www.unimib.it/informativa-studenti