



Azienda Regionale per il Diritto Allo
Studio Universitario Regional
Company for the Right to University
Education.

Via San Francesco, 122
35121 – Padova
Tel 0498235611
Fax 0498235663
VAT No. 00815750286

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www.esu.pd.it

ERASMUS+ STUDY PROGRAM
REGIONAL SUPPLEMENT TO MOBILITY GRANT
SUPPLEMENTARY GRANT APPLICATION AY 2020/2021

(application deadline **01/03/2021**)

I, the undersigned born in on
resident in Prov. Via/Street and no.
Postcode/CAP Tel. cell. email
Tax Code/Codice Fiscale
enrolled on course year c/o Conservatoire School Ling Med. campus

REQUEST

the regional supplement, paid by ESU, to the mobility grant funded by the European Community within the
framework of the aforementioned program to be used (indicate host country)
from to which will be credited to the IBAN
in the name of TaxCode/CF

I, aware of the legal sanctions and forfeiture of any benefits obtained, provided for by articles 75 and 76 of the DPR of 28 December 2000, no. 445 as amended, in the event of false declarations or production of false documents,

DECLARE

- 1) that I am aware that the purpose of the supplement assigned to me relates to staying abroad to carry out educational activities provided for in my study plan and duly approved by the competent academic authority;
- 2) that I am aware that the period of study abroad must only take place as approved;
- 3) that I have never previously benefited, even when studying at a different Higher Education Institute, from the status of ERASMUS student - with or without Community grant - for mobility for study purposes, for the same study cycle;
- 4) that I am aware that ESU is not required to pay the beneficiary student before ESU has collected the funds from the funding body;
- 5) that I am acquainted with the civil and criminal liabilities that I face in the event that I make different use, in whole or in part, of the aforementioned supplement.

Date,

Signature of the applicant



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SELF-CERTIFICATION

pursuant to articles 46 and 47 of Presidential Decree no. 445/2000 as amended and supplemented.

I, the undersigned born in on
resident in Prov. Via/Street and no.
Postcode/CAP Tel. Cell. email
Tax Code/Codice Fiscale

under my own responsibility

DECLARE

- **that I am aware** that this self-certification is subject to checks by ESU for the purpose of disbursing the supplementary grant (Article 71 of Presidential Decree no. 445 of 28.12.2000);
- **that I am aware** that false declarations, the indication of data that does not correspond to the truth and the use of false documents are punished by specific criminal sanctions and with the forfeiture of any benefit obtained, pursuant to articles 75 and 76 of Presidential Decree no. 445 of 28.12.2000;
- **that the Economic Indicators** relating to *ISEE 2020 Certification for Right to University Study Subsidies/ISEE Parificato (referring to income and assets for the year 2018)*

ISEE

ISP

Number of members of family unit

Equivalence scale

Protocol Number INPS -00 Submission Date

Date, Student's signature

A copy of a valid identification document is attached

Foreign students must also attach copy of their "permesso di soggiorno"/residence permit