



Regione Lombardia

**FONDAZIONE
DELLA COMUNITA
BRESCIANA**



APPLICATION FOR ADMISSION

INTERNATIONAL SYMPOSIUM OF SCULPTURE Third Edition

Surname

Name



SCUOLA DELLE ARTI E DELLA FORMAZIONE PROFESSIONALE RODOLFO VANTINI

Via Caduti Piazza Loggia 7/b – 25086 Rezzato (BS)

Tel. 030/2791576 – Fax. 030/2791786 – info@vantini.it – www.vantini.it – www.giovaniscultori.it

I the undersigned

(surname and name)

APPLY

for admission to the **International Symposium of Sculpture**
formative year
for himself/herself ___ for his/her son /daughter ___

aware of the responsibilities envisaged for falsification of documents and false statements, under the D.P.R. 445/2000
"Consolidated text of the laws and regulations on administrative records"

DECLARE

STUDENT'S PERSONAL INFORMATION

Name (*)				Surname (*)			
Date of birth (*)	Birth place (*)					Prov. (*)	
State (Italy/Foreign Country) (*)	Fiscal code (*)		Gender (*)	Nationality (*)			
Place of residence: Street name, house number (*)				City (*)	Post-code (*)		
Telephone (*)	Mobile (*)						
Domicile (if different from from the place of residence) (*)				Post-code (*)			
Street name, house number				City:			
Telephone				Mobile			

Current employment (*)

- Searching for employment since 6 months or less from graduation (someone who has never worked and is either still studying or job-hunting)
- Searching for employment since 6-11 months from graduation (someone who has never worked, isn't studying but job-hunting)
- Searching for employment since 12-24 months from graduation (someone who has never worked, isn't studying but looking for employment)
- Searching for employment since more than 24 months from graduation (someone who has never worked, isn't studying but looking for employment)
- Employed (including temporary and atypical employment)
- Unemployed or enrolled on unemployment lists, looking for employment since 6 months or less (someone who has lost or has left his/her job including temporary and atypical employment and including women intending to return to the job market)
- Unemployed or enrolled on unemployment lists, looking for employment since 6-11 months (someone who has lost or has left his/her job including temporary and atypical employment and including women intending to return to the job market)
- Unemployed or enrolled on unemployment lists, looking for employment since 12-24 months (someone who has lost or has left his/her job including temporary and atypical employment and including women intending to return to the job market)
- Unemployed or enrolled on unemployment lists, looking for employment since more than 24 months (someone who has lost or has left his/her job including temporary and atypical employment and including women intending to return to the job market)
- Student
- Inactive

Title of qualification awarded (*)	Mark	Year

Name and type of organisation which provided education

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Please mention any schools /courses attended without gaining the corresponding diploma (*)

- Secondary school - junior high school
- Three years reformed secondary school
- Technical high school
- Art high school
- University
- Two years reformed secondary school
- Vocational training school
- Teacher's college
- Lycée
- I interrupted no courses

Last completed year

Currently living with

- his / her own family with both parents
 his / her own family with only on parent
 Consort / partner
 Consort / partner / children
 Friends
 Others
 Alone

His / her own family is composed by

Surname and name	Place and date of birth	Job	Relationship

How did you hear about this Symposium? (*)

- through posters / depliants
 through newspapers - TV/radio spot announcement
 through youth / unemployed centres
 through the civil employment centre
 through the private employment centre
 through the school's teachers
 through the organization centre
 through internet
 through the education and employment councillor's offices (Region and Province)
 through the regional employment bureau
 through friends / relatives or acquaintances
 through the company I'm working for
 others specify

Declares to be enrolled on employment offices (*)

yes no

Enrolled on the employment office since

If employee, please indicate your company position

- Executive
 Management
 Employee or intermediate
 Worker, subordinate or similar
 Apprenticeship
 Home-office on behalf of a company

If self-employed, please indicate your job:

- Entrepreneur
 Freelancer (lawyer, doctor, etc.)
 Self-employed worker
 External consultant
 Member of a cooperative association
 Assistant

If employee, please indicate your contract-type

- Supply work
 Fixed-term contract
 Long-term contract
 State subsidy
 Socially useful jobs
 On-the-job training
 Apprenticeship
 Job practice based on grant for professional integration
 Job practice for professional accreditation

Type of employment

- Full time
 Part Time

Which industry are you working in?

Name of the Company / Organisation that you are working for:

Address of the Company / Organisation head office :

City Address (street name) House number

Telephone Fax e-mail

Number of employees of the Company / Body / Organization you're working in

If unemployed, are you currently job-hunting? yes no

If student, then specify which type of school you're attending

- Secondary school IFTS course (high technical education)
- Graduate or equivalent course (including school for physical training and conservatory) Post graduation course

Course year

List of tools/ equipment

Documents to be attached to this announcement

- Curriculum vitae Pictures of the realized works Drawing of the planned piece of work
- Title of the planned piece of work
- Copy of a valid identity card Sketch's Photos to realize

Notes

Date _____

Signature

I hereby declare to be aware that the school is allowed to use the data included in this document only for institutional purposes (according to D.Lgs 30/06/2003, n. 196 "Codice in materia di protezione dei dati personali"). These data will be handled on paper or on electronic media by administration operatives; they will be collected, organized, preserved, processed, modified, selected, extracted, compared, used, interconnected, object of block, deleted, destroyed, anyway such as to guarantee their safety and privacy. They can be forwarded to third parties such as: Region, Provinces, Towns, Local Education Authorities, Ministry of Education, public and private schools, Inail (national institute for the insurance against on-the-job injuries), Inps (Italian state body which coordinates national insurance funds), Istat (Central Statistic Institute), Universities, requesting Companies and any other Authority, Organization or Company with whom the Institute deals for the execution of administrative and educational tasks.

Date _____

Signature