



SAPIENZA UNIVERSITY OF ROME
FACULTY OF INFORMATION ENGINEERING, COMPUTER SCIENCE AND STATISTICS

DEPARTMENT OF STATISTICAL SCIENCE

Complete the form in block letters and send it by email to luigia.dipalma@uniroma1.it and in Cc to didattica-dss@uniroma1.it within the same deadline for the graduation application, as for Infostud..

Master of Science:

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Name Student ID

Place of Birth Date of Birth

Residential address..... State..... ZIP.....

Street.. Phone Number

Private email

Institutional email.....

Thesis title:

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SUPERVISOR.....

CO-SUPERVISOR

In compliance with the Italian legislative Decree no. 196 dated 30/06/2003, I hereby authorize the Department to provide the data contained in this document to companies and entities that request lists of graduates for offers of collaboration and / or employment.

Date.....

(Student signature)