



Annex A

Enrolment application form for the school year 2015-2016 for nursery Policino of the Politecnico di Torino

I undersigned _____

- ☐ Father
- ☐ Mother
- ☐ Guardian/Foster parent

Relationship with the Politecnico di Torino:

- ☐ Full-time technical and administrative staff
- ☐ Full-time faculty staff
- ☐ Part-time technical and administrative staff
- ☐ Part-time faculty staff
- ☐ Fellowship holder (employment contract with Politecnico)
- ☐ External collaborator (employment contract with Politecnico)
- ☐ PhD students or students enrolled in Polito PhD courses
- ☐ Staff belonging to companies and external bodies which have an agreement with Politecnico
(specify) _____

Phone number _____ E-mail address _____

**I APPLY FOR BEING ADMITTED IN THE NURSERY
POLICINO LOCATED IN C.SO CASTELFIDARDO 51**

FOR THE SCHOOL YEAR 2015/2016

With the following timetable:

- ☐ FULL TIME (from 8.00 a.m. to 4.30 p.m)
- ☐ PART-TIME-MORNING (from 8.00 a.m. to 1.00 p.m)
- ☐ "VERTICAL" PART TIME (from 8.00 a.m. to 4.30 p.m)
 - 2 DAYS PER WEEK (please specify the days for which you opt) _____
 - 3 DAYS PER WEEK (please specify the days for which you opt) _____



For the child:

NAME _____ SURNAME _____

Born in _____ on _____

Citizenship _____

Postal address _____ CAP _____

In _____ n. _____

Health book N. _____ Fiscal Code _____

In order to be inserted in the ranking list, I undersigned declare that:

- ☐ The members of the family unit¹ are n. _____
- ☐ Number of children (including the baby for whom the application is submitted)
 - children 0-3 years n. _____
 - children 4-6 years n. _____
 - Minor children who are more than 6 years old n. _____
- ☐ family unit including a parent who is in physic and or psychic conditions compared to invalidity (equal or more than 66%) (ASL- local health institution certification in attachment)
- ☐ family unit including a parent who can be entitled to the treatment of the Italian law 104/1992 (ASL- local health institution certification in attachment)
- ☐ single-parent family unit (where the baby is recognized by a single parent or family unit with a dead parent or a single parent who is entitled to the parental authority)²
- ☐ family unit with separated parents or parents who applied to a court obtain a separation, divorced, unmarried (only if they do not cohabit permanently)³
- ☐ disabled child for whom the application is submitted (ASL- local health institution certification in attachment)
- ☐ family unit with other disable minors (ASL- local health institution certification in attachment)
- ☐ the enrolment application is submitted for n. ____ brothers or sisters for the same school year
- ☐ ISEE in attachment (economic situation index)

¹ In the family unit of the child for whom the application is submitted, the members to be considered are the parents living together and any brother or sister

² A single-parent family unit is a family unit formed by single parent who apply and live with his/her child. Please note that if the applicant is remarried or cohabits permanently with another person, any point can be assigned..

³ Ibidem.



I undersigned declare to be aware that, if the above declarations are false, in accordance with the art. 76 of the Italian decree n. 445/2000, I will be subject to the penalties in accordance with art. 483 and following articles of the Italian penal code, as well as losing the possible benefits in accordance with art. 75 of the Italian decree n. 445/2000

Turin, _____

Signature _____

Please find attached the copy of the IDENTITY CARD

TYPOLOGY _____ N. _____

ISSUED BY _____ ON _____

I undersigned declare to be informed and I agree that the provided data will be used with the aim of working out the ranking list and of the enrolment in the nursery in accordance with the Italian decree 196/2003.

Turin, _____

Signature _____