

## REIMBURSEMENT REQUEST FORM – ADVANCE PAYMENT OF THE 1<sup>ST</sup> INSTALLMENT International Applicants - Master of Science Programs a.y. 2012-2013

s	STUDENT ID
S	SURNAME
F	IRST NAME
Р	Place of birth Prov. ( ) date of birth/
	I hereby request reimbursement of the advance payment of the 1st installment
	To that end I hereby declare that:
	□ I have <b>enrolled</b> (that is I have submitted the documents necessary for first-year enrollment)
	□ I have <b>not enrolled</b> (that is I have <i>not</i> submitted the documents necessary for first-year enrollment)
	□ I've been <b>admitted</b> and I have <b>not enrolled</b> (that is I have submitted the documents necessary for first-year enrollment) but I have <b>not completed</b> /cannot complete the <b>Bachelor degree</b> (document attesting that the degree has not been completed is attached)
	□ I am a student recipient of <b>Bocconi Graduate Merit Award</b> but I have withdrawn from studies and the scholarship before 22 maggio 2012
	□ I am an incoming transfer students and I have rejected the deliberation for recognition of credits
	□ I am a <b>Bocconi graduate</b> and I have <i>rejected</i> the deliberation for recognition of exams to complete a <b>second degree</b> .
	For the reimbursement application, I am sending or submitting:  this reimbursement request completed and signed, including the Attachment  copy of my passport/national ID card (in addition to the parental authority if student is minor)  the original payment receipt
	Documentation must be
	<ul> <li>sent by certified mail with receipt of delivery to the following address (the date of the postmark will be considered the date of submission):         Università Bocconi         Admissions Office         Master of Science programs         REIMBURSEMENT REQUEST         Piazza Sraffa 11 - 20136 MILANO (ITALY)</li> <li>or submitted directly to the Admissions Office at the One Stop Service Center at Piazza Sraffa, 13.</li> </ul>
	ware that the advance payment of the 1st instalment will be reimbursed only in the cases and under the terms set out in the ations published on the University website.
ate _	Signature
То	be completed by the Admissions Office
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## Attachment - Data for reimbursement of advance payment of 1st installment a.y. 2012-2013

	STUDENT ID
	SURNAME
	FIRST NAME
	Mobile number email
	I live abroad and therefore provide the following bank details for the <u>bank transfer</u> :
	BANK
	BRANCH
	BANK ADDRESS
	BANK COUNTRY
	Account No
	Name of the Account Holder
	IBAN
	SWIFT
	ABA (United States)
	I live in Italy and therefore request the check to be sent to the address:  □ already provided to Università Bocconi and confirmed during the online enrollment  □ listed below because it was not confirmed during the online enrollment
	Address n
	City Prov. ( ) Zip code
,	I am aware of the verification process that the TCA - Tuition and Fees Office will carry out regarding my refund request.
	The TCA assumes no responsibility for failure to communicate variations of information provided.
	Date Signature

