



€16 virtual
revenue
stamp paid

**To the Rector
of IULM University**

I, the undersigned..... student ID number.....
born in..... on.....
and resident in Via
enrolled as a student in the _____ year of the **Bachelor's** **Master's** degree course
in
.....
for the academic year...../.....

REQUEST

to be transferred..... to the University of
Faculty/Department of.....
Course of studies in

ATTACHMENTS:

- **Clearance certificate issued by the Library**
- **Clearance certificate issued by the Right to Study Office**
- **Transfer fee receipt**

Date.....

ID number.....

Address.....

Email.....

Student's signature

.....