



UNIVERSITÀ DI PISA

FULL TIME MRM

Master in Risk Management

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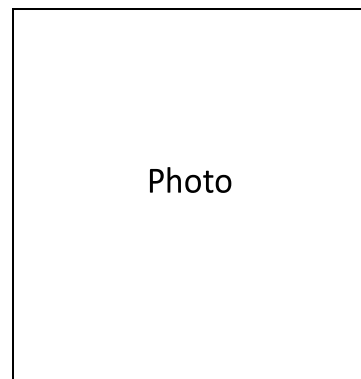
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**If you need to contact the MRM Admission Team about this form or if you have any other question,
please contact us by e-mail at this address:
master.rm@ec.unipi.it**

Full Time MRM - Application form

Application form must be sent to:

MRM Admission Team
Dipartimento di Economia e Management
Via Ridolfi, 10 - 56124 Pisa
Tel +39 050 2216227
Fax +39 050 2210603
E-mail: master.rm@unipi.it



1. Personal Information

Surname/Family name: _____

First name: _____

Date of birth (dd/mm/yy): _____ Place of birth: _____

Country: _____ Nationality: _____

Permanent Address

City: _____

Country/State/Province: _____

Postal code: _____ Telephone: _____

Current Address

City: _____

Country/State/Province: _____

Postal code: _____ Telephone: _____

Fax: _____ Mobile: _____

E-mail: _____

2. Education

Secondary education qualification

Type of diploma _____

School/College _____ City _____

Country/State/Province _____ Year _____

University

University attended _____

Title of degree obtained _____

Date of accomplishment _____

Class or grade point average _____

Major subject studied _____

You may list any awards, honors or study grants received to support your application:

DATE	FIELD (specify)	NATURE OF AWARD

You may list internships, long-term training and executive education courses attended after graduation:

3. Spoken Language

	Mother Tongue	Advanced	Good	Fair	Beginner
English					
Italian					
Spanish					
German					
French					
Other_____					

4. Abroad Experience outside your home country

Date: from (m/y) – to (m/y)	Country	Activity (studies, work, living, travel)

5. Personal statement

Why do you wish to apply to the MRM program?

What do you expect to get from the MRM program?

6. Financing your MBA

Individual tuition fee is € 8.000. Payments are to be made before the end of the course.

Who will pay your tuition fees for the MRM?

- | | | | |
|----------------------|------------------------------|-----------------------------|-----------------------------------|
| Yourself | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> POSSIBLY |
| Your company | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> POSSIBLY |
| Another organization | <input type="checkbox"/> YES | <input type="checkbox"/> NO | <input type="checkbox"/> POSSIBLY |

Will you be applying for financial assistance? YES NO

7. Marketing information

How did you find out about the Course?

- Advertising (please specify) _____
- Search Engine (please specify) _____
- MRM website _____
- MRM related website (please specify) _____
- Online newspaper/Magazine (please specify) _____
- Banner advertisement (please specify) _____
- Brochure sent by the University of Pisa _____
- Teachers _____
- Friends _____
- Other (please specify) _____

I declare that all the information given is true and I understand that all omission of facts in this form could cause my application to be rejected. I authorize the MRM Admission Team to verify this information.

DATA _____

SIGNATURE _____