



UNIVERSITÀ DI PISA

FULL TIME MRM

Master in Risk Management

Application Form

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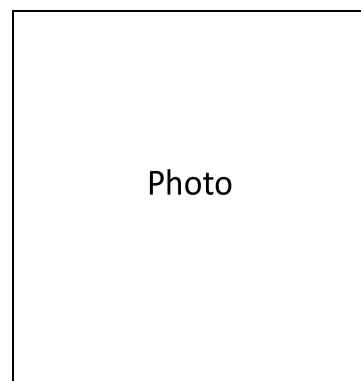
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**If you need to contact the MRM Admission Team about this form or if you have any other question,
please contact us by e-mail at this address:
master.rm@ec.unipi.it**

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)

6. Financing your MBA

Individual tuition fee is € 6.990. 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 _____