



Scholarship application for female students admitted to the first year of the Bachelor in Informatics for the academic year 2023/24

Personal details		Please complet	e the application form in capit			
Personal details			Please complete the application form in capital letters.			
		First name(s)				
		Surname (Fami	ly name)			
	Date of birth	Day	Month	Year		
	Mother tongue	O Italian	O German	O French	O English	
		Other				
	Nationality					
	Place of origin (Swiss nationals)	City		Canton		
	Place of birth (foreign nationals)	City		Country		
Degree which granted admission to the Bachelor's		Exact name	Exact name			
programme at USI		Name and addr	Name and address of school			
		Carduatianus	_			
		Graduation yea	1			
Declaration		contribute to ur and conditions invoiced for. The to define his/he Data Protection	The Treaty signed on 20 February 1997 provides that all Swiss Cantons (including the Principality of Liechtenstein) shall contribute to university costs each proportionately to the number of its citizens in higher education. According to the terms and conditions of the Treaty, each Canton is free to check the list of registered students against the amount it has been invoiced for. The undersigned applicant hereby confirms that (s)he is fully aware that the data provided in this form, and use to define his/her fee status, may be shown to the competent authorities of their home Canton. To comply with the cantonal Data Protection Act, assurance is given that all information provided herein will be treated as fully confidential, and may be processed and used for administrative (statistics) and academic purposes only.			
		O I hereby confirm	I hereby confirm that the information I have provided on this form is complete and true.			
		Date		Signature		