



To the protocol office
of Università Iuav di Venezia
Diplomas office
Tolentini, Santa Croce 191
30100 Venezia

PLEASE FILL IN IN BLOCK LETTERS

I, the undersigned (*name/surname*) _____
born in _____ (_____) on ____/____/____,
graduated in (*degree programme's name*) _____ in the academic year
_____ on (*graduation date*) ____/____/____

require

the free shipping with registered mail of my original graduation diploma,

to the following address:

name/surname _____ city
_____ (_____) ZIP code _____ street/road
_____ n. ____ phone number _____ email address
_____.

I exempt Università Iuav di Venezia from any liability in case my diploma is lost while shipping.

I attach to this request a copy of a valid ID.

date _____

signature _____

I also declare that, pursuant to art.13 of EU Regulation 2016/679 (General Data Protection Regulation), I am aware that the personal data collected will be exclusively processed within the procedure for which I am applying, as specified at <http://www.iuav.it/PRIVACY/>