



UniSR

Università Vita-Salute
San Raffaele

SINGLE COURSES ENROLMENT FORM

To the Rector of Università Vita-Salute San Raffaele

I, the undersigned _____ having submitted the application for single course(s),

Request

- **To be enrolled** for the Academic Year ____/____ in the following single course(s):

Course Title:

Degree Course:

- **To be allowed** to sit the exam(s), upon verification of the regularity of the administrative position.

Date ____/____/-----

SIGNATURE (full and legible)

Università Vita-Salute San Raffaele

Via Olgettina 58 – 20132 Milano

Tel. +39 02 91751 500

P. IVA 13420850151 – Cod. Fisc. 97187560152 – N° REA MI-1511742

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Attachments:

1. Copy of the payment of fees and contribution. The payment has to be made in a single solution upon registration by bank transfer to the following account:

BANCA POPOLARE DI SONDRIO Sede di Milano, Via S. Maria Fulcorina, 1- 20123 MILANO (MI)

c/c n. 16782/34 to the name of UNIVERSITA' VITA-SALUTE SAN RAFFAELE

IBAN: IT73U0569601600000016782X34

BIC/SWIFT: POSOIT22

2. Passport-size picture
3. For students holding a non-Italian Secondary School diploma and/or University degree, an original copy of the diploma(s) to be presented in person to the Admissions Office

The above mentioned documentation must be submitted to the Admissions Office ONLY via email at the address ammissioni@univr.it.

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