



UNIVERSITÀ DEL PIEMONTE ORIENTALE

DIPARTIMENTO DI GIURISPRUDENZA  
E SCIENZE POLITICHE,  
ECONOMICHE E SOCIALI  
Settore Amministrazione

Via Cavour, 84 – 15121 Alessandria AL  
Tel. 0131 283826- Fax 0131 283704

I the undersigned (complete name and surname) \_\_\_\_\_ M  F

Born on the \_\_\_\_\_ in \_\_\_\_\_

Province/Nation of birth \_\_\_\_\_ Nationality \_\_\_\_\_

Residence (complete address) \_\_\_\_\_

Town \_\_\_\_\_ Province/Nation. \_\_\_\_\_

Mobile phone (specify if the number is Italian or foreign) \_\_\_\_\_

Personal code (matricola) \_\_\_\_\_

**DELEGATE**

Mr/Mrs/Ms (complete name and surname) \_\_\_\_\_ M  F

Born on the \_\_\_\_\_ in \_\_\_\_\_

Province/Nation of birth \_\_\_\_\_ Nationality \_\_\_\_\_

Residence (complete address) \_\_\_\_\_

Town \_\_\_\_\_ Province/Nation. \_\_\_\_\_

Document n. \_\_\_\_\_ issued by \_\_\_\_\_

on the \_\_\_\_\_

to (indicate task for which the proxy is given)

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Place and date \_\_\_\_\_

Signature \_\_\_\_\_