

## SOROPTIMIST INTERNATIONAL OF EUROPE LEADERSHIP ACADEMY ITALY

**Deadline changed, moved to 18 September 2023**

### Application Form for Admission to the Course

## *“Leadership without borders”*

**6-10 November, 2023 - COMO – ITALY**

Please fill in, sign and send by **18 September 2023** attaching a CV, a copy of the ID Card, a copy of the Degree Certificate and the signed Privacy Disclaimer by mail to [sielaitaly@gmail.com](mailto:sielaitaly@gmail.com)  
in copy to the following e-mail addresses

[SIEHQ@soroptimisteurope.org](mailto:SIEHQ@soroptimisteurope.org) and [sep@soroptimist.it](mailto:sep@soroptimist.it)

More information at: [www.soroptimisteurope.org](http://www.soroptimisteurope.org) and [www.soroptimist.it](http://www.soroptimist.it) – “Bandi” section

Soroptimist Club/Single Club/Union of (if applicable) \_\_\_\_\_

Name \_\_\_\_\_ Surname \_\_\_\_\_

Address \_\_\_\_\_ Post Code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_

Phone/Mobile \_\_\_\_\_ e-mail \_\_\_\_\_

date of birth \_\_\_\_\_ place of birth \_\_\_\_\_

Degree in \_\_\_\_\_

Achieved at the University of \_\_\_\_\_

In the Academic Year \_\_\_\_\_ with a final grade of \_\_\_\_\_

**I wish to submit my application to participate in the competition to be admitted to the above mentioned Course.**

Hence, I state that:

- I have read the competition call and meet the requirements also resulting from the Master's Degree Certificate that I will submit in copy to this application
- I have good knowledge of the English language, such as FCE or TOEFL certification
- I am aware all charges for travel to and from Como are my responsibility.

**I also declare that, should I be the winner, I will undertake**

d) to hand in to the SIE Leadership Academy-Italy Team a written motivational statement of my intention to participate in the Course



e) to pay €100 contribution for participation when the shortlist will be announced

f) to attend regularly the activities scheduled for the Course;

(date) .....

(signature) .....

I, the undersigned, a candidate in the competition announced by Soroptimist International Europe and Italy, in agreement with SDA BOCCONI of Milan, commit myself to attend the training course "Leadership Without Borders" as detailed in the announcement, namely in Como (Italy), on 6-10 November 2023, and accept all the conditions envisaged by the announcement.

If I am unable to attend the course, I undertake to immediately notify the President of the Soroptimist Club in my city and [sielaitaly@gmail.com](mailto:sielaitaly@gmail.com) in copy to the following e-mail addresses [SIEHQ@soroptimisteurope.org](mailto:SIEHQ@soroptimisteurope.org) and [sep@soroptimist.it](mailto:sep@soroptimist.it), so that I can be replaced with another candidate, according to the ranking established by the Commission of selection.

If, due to my negligence, whoever was to replace me cannot be notified in time, I acknowledge that, in addition to the moral responsibility of having prevented others from taking advantage of this opportunity, I could also be held materially responsible for the economic damage caused by me (tuition fees, educational material, etc.).

I also agree to abide by the schedules, rules, regulations and anything else that will be communicated to me by those in charge of SDA BOCCONI and Soroptimist, in order to collaborate in the success of the initiative. I am aware that in case of unjustified absences or if my behavior causes inconvenience or difficulty, I will be excluded from the Course. I enclose with this form a photocopy of my identity document (front/back).

Finally, I declare that I am fully responsible for my every act, movement and transfer and release Soroptimist, SDA BOCCONI and any others connected from any responsibility in this regard.

I undertake to abide by the prohibition to use the teaching materials of the Course given to me during the course, which are the full property of SDA BOCCONI and therefore I will not make them the object of dissemination to third parties, unauthorized reproduction and publication, even by telematic means. Violation of this clause will result in my responsibility for compensation for any damages caused to SDA BOCCONI.

I authorize the processing of my personal data for the purposes set forth in point 2, letters a) and b) of the attached Privacy Notice, which I have read.

Read, approved and undersigned

Date \_\_\_\_\_

Signature \_\_\_\_\_