

first statement

change

## STATEMENT

academic year \_\_\_\_\_

Pursuant to the requirements relating to the tax register and the tax code of taxpayers (Presidential Decree no. 784 of 02/11/97)

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Note: This statement must be entirely filled out and it will be valid until otherwise provided. Fields preceded by \* are optional.

### Personal Details

Last name

First name (include middle names)

Marital status

Date of Birth

City of Birth

Tax identification code

Address

Municipality

Zip Code

province

Phone

e-mail

### payment

method Bank transfer <sup>1</sup> - Bank details IBAN

Code:

Cin

ABI (Bank Code)

CAB (Branch Code) C/A

Bank

Address

City

Zip Code

Doctorate Cycle

Course year

Unit Department

Address

City

Zip Code

\*e-mail

\*telephone

I declare that I am registered with INPS - office of \_\_\_\_\_

I declare that I also pay contributions through the following social security fund \_\_\_\_\_

**NOTE:** The personal data will be processed according to D. Lgs. N. 196 of 2003 (Code concerning the personal data security) and its following amendments and integrations and to the Regulations UE 2016/679 (General Regulations about data security). You can look over the information at the following link: <https://www.unimib.it/informativa-studenti>

Date

Signature

<sup>1</sup> The current account must be in the name of, or jointly held by, the doctorate student