# ENROLLMENT PROCEDURE
SUMMER COURSE

1. To attend the summer course of the School of Bioethics, admission and registration are required.

2. To apply for admission and to register, the following documentation should be submitted to the Registrar's Office (**Segreteria Generale**):

   a. A completed Request for Admission and Registration Form. (For priests, religious, and seminarians, the application form should include your college's stamp and your rector's signature.)

   b. A transcript of your most recent college-level and university-level degree or studies.

   c. Two photocopies of some form of identification (birth certificate, passport, ID card).

   d. Three passport-size color photos.

3. After submitting the documentation you will receive a confirmation, usually by e-mail, along with instructions for accessing our online enrollment system (Banner) to complete your registration online.

4. Those attending the summer course are expected to adhere to the regulations established by the University.

5. This application form is available online at the English School of Bioethics website in PDF format. The forms should be filled out in their entirety, and the originals submitted to the Registrar's Office (Segretaria Generale) by the deadlines published on the English School of Bioethics website.

6. In order to expedite enrollment for students coming from abroad, we suggest the following:

   a. Download the Request for Admission and Registration Form from our website, and fill them out completely.

   b. FAX a copy of the completed forms in advance, along with a photocopy of some form of identification, to our FAX number (+39 06 66527814), and include a valid e-mail address so that the Registrar's Office (Segreteria Generale) can contact you.

   c. On the first day of the summer course you can complete your registration by paying the registration fee and submitting the originals of all the documentation requested in point 2. above.

   d. The Registrar's Office (Segreteria Generale) will contact you about using our online enrollment system in order to register for specific sessions.

   e. For further information, please contact:
   Italian and Spanish speakers: Dott. Emmanuele Di Leo(e-mail: bioetica@upra.org)
   English speakers: Fr. Nikola Derpich,L.C. (e-mail: bioethics@upra.org)

REGINA APOSTOLORUM PONTIFICAL UNIVERSITY
Academic Year ....

PHOTO
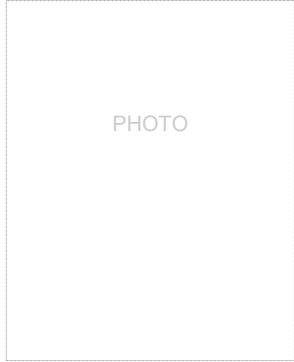
REQUEST FOR ADMISSION

Student number *

☐☐☐☐☐☐☐

INSTRUCTIONS FOR COMPLETING THIS FORM
- Read the form carefully before filling it out
- Please print
- Check the appropriate boxes and fill out the form using the spaces indicated
- To endure admission, do not omit information

Program: Summer Course (entire course) ☐

Summer Course: Session I ☐

Summer Course: Session II ☐

PERSONAL INFORMATION

Last name ……………………………………………….. First name ………………………………………………………

Birthplace ……………………………………………… County …………………………………………………

State ……………………………..……. Country …………………………………….. DOB (dd/mm/yy) ___/___/_____

Nationality ………………………………………………………………………………..Sex: M ☐ F ☐

Passport number …………………………………………………………………………………….

Civil Status   Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed ☐
Status   Layperson ☐ Seminarian ☐   Priest ☐ Religious ☐

Diocese or Congregation: …………………………………….. *College:* …………………………………..

MAILING ADDRESS
(if different from your legal residence)

Street …………………………………………………………………………..no. ……………

Institution (if applicable) ……………………………………………………….. ZIP …………………..

City ………………………… State ………………………………… Country ………………………………….

Home phone ………………………………… Cell …………………………………………………….

E-mail ………………………………………..Web …………………………………………………………...

) for Registar's Office Use

LEGAL RESIDENCE
(if different from your mailing address)

Street …………………………………………………………………….no. ………………………

Institution (if applicable) ………………………………………………….. ZIP …………………..

City ………………………… State …………………………… Country …………………………….

STUDIES

Pre-university:

Institute or School ………………………………………………………………………………………..

City …………………………………………… Country ……………………………………………………

From the year _____ to _____ Diploma obtained …………………………………………………..

Philosophy Majors:

University or Faculty …………………………………………………………………………………………

City …………………………………………… Country ……………………………………………………

From the year _____ to _____ Diploma obtained …………………………………………………..

Theology Majors:
University or Faculty …………………………………………………………………………………………

City …………………………………………… Country ……………………………………………………

From the year _____ to _____ Diploma obtained …………………………………………………..

Other University-level Studies:
University or Faculty …………………………………………………………………………………………

City …………………………………………… Country ……………………………………………………

From the year _____ to _____ Diploma obtained …………………………………………………..

Language proficiency: *Mother tongue:* …………………………………………………………………..

Language	Fluency level	Language	Fluency level
………………	……………………………	…………………	……………………………
………………	……………………………	…………………	……………………………
………………	……………………………	…………………	……………………………
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………………	……………………………	…………………	……………………………

ATTACHED DOCUMENTS

For all students:

☐ 3 passport photos   ☐ photocopy of ID

                                                  ☐ transcript of your most recent studies

[Priests in study, Religious and Seminarians only]

The student's Superior approves and recommends admittance

<div style="border:1px solid #ccc; text-align:center">SEAL OF THE SEMINARY, COLLEGE, OR INSTITUTE</div>

_____
(signature of the Seminary/College/Institute Rector)

Aware that providing false or not entirely true information would have bearing on the success of this application, I declare that the information above to be true and accurate.

Date: ………………………………….   Signature: ……………………………………………………

Notice and request for consent regarding the transmission and use of your personal information (in the light of art. 13 D. lgs 196/2003 of Italian law):

Your personal information will be used by the University to elaborate the pertinent issues concerning your academic career and the initiatives required for the development of University programs. According to Italian Law the student reserves the right to prohibit the use of personal information. In such a case, the University will proceed to cancel all information without further charge, but the Institution will likewise be obliged to interrupt any academic relation.

Student Signature of consent ……………………………………………………………………………

DATE ___/___/_____ REVIEW BY ADMISSION DEPT. …………………………………………….

ADMISSION EVALUATION

PHOTO
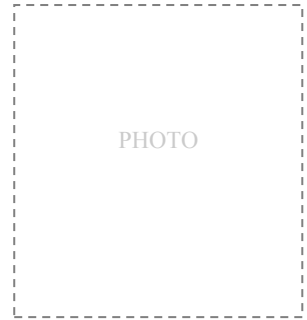
Last name …………………………………………………………… First name ………………….............

Birthdate ……………. Place ……………………… Civil status………………….......

Residence ………………………………………………………………………………………………………
Street

…………………………………………………………………………………………………
ZIP/State/Province   Phone

Residence during the course …………………………………………………………………………....
(if different from above)   Street

……..
ZIP/State/Province   Phone

SUMMER COURSE 2007	
❑ Summer Course (entire course)	❑ NEW STUDENT
❑ Summer Course: Session I	❑ ALREADY ENROLLED AS STUDENT ID:
❑ Summer Course: Session II	…………………………………
	Main enrollment (Licentiate, Doctorate, Master)

COMMENTS:
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Additional documentation:
………
………

Date _____/_____/_____

REG. SEGR. GENERALE

_____
Dean's Signature