**APPLICATION FOR THE ENROLMENT AT THE 1st grade SECONDARY SCHOOL**

To the headmaster of the Istituto Comprensivo “Moro” in Solbiate Olona

The undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (surname and name)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (surname and name)

In their capacity as □ parents □ guardians □ foster parents

 **HEREBY APPLY**

To enrol the student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (surname and name)

At the secondary school □ ”Moro” in Solbiate Olona □ “Volta” in Gorla Maggiore

For the school year 202\_\_/202\_\_ they ask to have recourse to the following school time according to the triennial schooling offer plan (PTOF)

□ ordinary school time (30 hours a week).

□ extended school time (36 hours a week). This option is subdued to the staff availability and the presence of services and structures

□ extended school time (40 hours a week). This option is subdued to the staff availability and the presence of services and structures

For this purpose, according to the rules about the simplification of the administrative activity and being aware of the sanctions applicable under criminal law in the event of untrue statement

**HEREBY DECLARE THE FOLLOWING data of the student**

**PERSONAL DATA**

SURNAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITIZENSHIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GENDER M F

TAX CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIRTHPLACE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COUNTRY OF BIRTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If the student is not an Italian citizen, please specify if he/she has been living in Italy since before his/her 6 years of age**

□ YES □ NO

**RESIDENCE**

TOWN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE \_\_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ N° \_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DOMICILE (only if it is different from Residence)**

TOWN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE \_\_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ N° \_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After having examined the informative document issued by the school under the article 13 of EU Regulation 2016/679 drafted by the European Parliament and Council on 27th April 2016 about the protection of individuals with regard to the processing of personal data and their free circulation, the undersigned people declare to be aware that the school can use the data written in this enrolment exclusively in the context and for the institutional purposes of the public administration ( Legislative Decree 30/6/2003 n° 196 and following edits, EU Regulation 2016/679)

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*In compliance to the dispositions of the Civil Code about the filiation, the application to the enrolment must always be shared by both parents as it is part of the parents’ responsibility. The interested parties can examine the informative document on the school website.

**APPLICATION FOR THE ENROLMENT AT THE 1st grade SECONDARY SCHOOL**

STATEMENT OF PARENTS/GURADIANS/FOSTER PARENTS

**Please specify if the student:**

Is protected by the law 104/92  □ YES □ NO

Has a certification for DSA (special needs) □ YES □ NO

Is in social disadvantage (looked after by social services) □ YES □ NO

Has siblings who are attending the Istituto Comprensivo “Moro” □ YES □ NO

(if so, please indicate the school □ “Moro” □”Volta” □ “De Amicis” □”Pascoli” □”Ponti”)

Has only one parent □ YES □ NO

Both his/her parents work □ YES □ NO

Is a soldier’s child □ YES □ NO

**Personal Data of Parents/Guardians/Foster parents**

**MOTHER / FEMALE GUARDIAN / FOSTER MOTHER**

SURNAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITIZENSHIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TAX CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIRTHPLACE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COUNTRY OF BIRTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RESIDENCE**

TOWN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE \_\_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ N°\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DOMICILE (only if it is different from Residence)**

TOWN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE \_\_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ N°\_\_\_\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FATHER / MALE GUARDIAN / FOSTER FATHER**

SURNAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITIZENSHIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TAX CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIRTHPLACE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COUNTRY OF BIRTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RESIDENCE**

TOWN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE \_\_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ N°\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DOMICILE (only if it is different from Residence)**

TOWN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROVINCE \_\_\_\_\_\_\_\_\_\_ ZIP CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ N°\_\_\_\_\_\_\_\_

PHONE NUMBER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OTHER FAMILY MEMBERS WHO LIVE TOGETHER WITH THE STUDENT**

1 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Surname and Name)  (Family Relationship) (Place and date of birth)

2\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Surname and Name) (Family Relationship) (Place and date of birth)

3\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Surname and Name) (Family Relationship) (Place and date of birth)

4 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Surname and Name) (Family Relationship) (Place and date of birth)

5 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Surname and Name) (Family Relationship) (Place and date of birth)

6 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Surname and Name) (Family Relationship) (Place and date of birth)

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

N.B The data are used by the school in total respect of the laws about privacy under the Legislative Decree 196 in 2003 and following edits and under the EU Regulation 2016/679 drafted by the European Parliament and Council on 27th April 2016

**APPLICATION FOR THE ENROLMENT AT THE 1st grade SECONDARY SCHOOL**

**Application form to have recourse to the studying of the Catholic religion**

STUDENT’S SURNAME and NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Italian State assures the teaching of the Catholic religion in schools of every grade under the Achievement that edits the Lateran Agreement (art. 9.2). This form is an application to choose the possibility to have or not to have recourse to the studying of the Catholic religion.

Once you have chosen, your choice will be effective for the entire school year and for the following school years in the school where the official registration is provided. Anyway, at the beginning of each school year, you will be able to modify your choice.

□ the student **WILL have recourse** to the studying of the Catholic religion

□ the student **WILL NOT have recourse** to the studying of the Catholic religion

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNATURE\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*In compliance to the dispositions of the Civil Code about the filiation, the application to the enrolment must always be shared by both parents as it is part of the parents’ responsibility. The interested parties can examine the informative document on the school website.

**N.B The data are used by the school in total respect of the laws about privacy under the Legislative Decree 196 in 2003 and following modification and under the EU Regulation 2016/679 drafted by the European Parliament and Council on 27th April 2016**

**TOGETHER WITH THE APPLICATION TO ENROLMENT YOU MUST HAND OVER THE FOLLOWING DOCUMENTS TO THE SCHOOL SECRETARY**:

1. Photocopy of both the Identity Card and Tax Code of the parents/guardians/foster parents
2. Photocopy of both the Identity Card and Tax Code of the student
3. Certification of disability if the student is protected by the law 104/92
4. Certification of DSA (special needs) if the student is affected by specific learning disabilities
5. Upgraded document proving the student’s vaccination status

**Please note that any modification of the personal data (residence, telephone number, e-mail address, etc.) MUST BE IMMEDIATELY COMMUNICATED to the school Secretary by phone (0331-640143) or by e-mail (****vaic84600p@istruzione.it****)**

**APPLICATION FOR THE ENROLMENT AT THE 1st grade SECONDARY SCHOOL**

**PRIVACY POLICY INFORMATION**

Under the article 13 of the Privacy Policy (Legislative Decree 30/06/2003, n° 196, modified by the Legislative Decree 10/08/2018 n° 101 and the EU Regulation 2016/679 drafted by the European Parliament and Council on 27th April 2016) the personal data related to the new enrolled students at the 1st Grade Secondary School are collected for the enrolment purpose only.

1 The personal data and the information about the student and his/her family are requested to:

1. manage the enrolment of the student in the 1st Grade Secondary School “Moro” or “Volta” in the best way possible;
2. organize the activities in which the student will be involved (indoor or outdoor activities, school trips, educational trips);
3. be able to call an adult in case of need (phone numbers, e-mail addresses);
4. fulfil administrative obligations

2 Sharing the data and information requested with the school is mandatory for the pursuit of the purposes described in point 1

3 Some data, even personal data, could be communicated or transferred to specific legal authorities only if this communication is necessary to the fulfilment of the purposes described in point 1. Concerning to the needful operations for the protection of the student’s health, the school is authorised to operate without any limitations.

Below are some examples of possible communication areas with legal authorities:

1. Public authorities that are entitled to request the sending of data or information (Municipalities, Provincial and Regional School Office, AST, Social Workers);
2. Medical, paramedical or administrative staff of health organisations involved in control, prevention or assistance activities
3. insurance companies, experts or other legal authorities involved in the reimbursement procedures following accidents

4 Parents/Guardians/Foster parents are immediately asked to warn the school if there are some restrictions of any nature which need to be considered for the activities in which the student may be involved.