

SCUOLA INTERNAZIONALE SUPERIORE DI STUDI AVANZATI

Via Bonomea 265, 34136 Trieste (Italy) tel.: 04037871 - telefax: 0403787249

To the Director SISSA

I, the undersigned		born on
in	enrolled in the	year of the course, in the Sector
of	, for the	e present academic year 2010/2011,
domiciled in		
Street name		No
Codice fiscale No		
REQUEST A CONT	TRIBUTION TOWARDS L	IVING EXPENSES
	AND ENCLOSE	
in accordance with the decision o	of the Administrative Co	ouncil dated 25/01/2011 and on my
own responsibility, one or more do	ocuments relating to one	e of the following situations:
- rental contract presented for the	first time:	
☐ copy of registered contract valid for ☐ copy of registered contract and of	•	
to(if you rep	olace someone else in a r	registered contract).
- registered contract already prese (period of contract from		
☐ nothing enclosed (if you have page)		,
whole period of contract at the mo		to to Agenzia delle Entrate for the
□ copy of payment (F23 form) of "Im the "Imposta di registro" only for the	-	
- registered contract already prese	ented for the previous a	cademic years and expired:
☐ copy of new registered contract variety replaces the one already presente	•	to that
$\ \square$ copy of payment to Agenzia dell	e Entrate (F23 form) of	"Imposta di registro" for the renewal
valid for the period from	to	(if you renew the registered contract
copy of new registered contract a(if you replace so	•	
	אוווסטוום בוטב ווו מ ובעוטנלול	ou contracti.



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DECLARE

in accordance with and for the effects of art. 23 of DPR 600/1973 and subsequent modifications for Taxation Allowances (art. 13, DPR 917/1986) and in accordance with arts. 46 and 47 of D.P.R. 445/2000 and on my own responsibility that as from the academic year 2010/11 I am eligible for:

Date, _____

Signature _____