



## ADMISSION TEST APPLICATION

To the Headmaster of the Advanced School for Linguistic Mediators  
Via P. Vena, 66/C – 75100 - Matera

The undersigned \_\_\_\_\_  
born in \_\_\_\_\_ on \_\_\_\_\_  
and resident in \_\_\_\_\_ address \_\_\_\_\_  
phone number \_\_\_\_\_ cell number \_\_\_\_\_  
e-mail \_\_\_\_\_ nationality \_\_\_\_\_  
Tax Code \_\_\_\_\_  
possessing the following qualification \_\_\_\_\_

### ASKS

to be eligible to take the 1<sup>st</sup> year Admission Test of the Nelson Mandela School Linguistic Mediation  
Advanced Course, A.Y. \_\_\_\_\_/\_\_\_\_\_ for the English language, which is taking place  
on \_\_\_\_/\_\_\_\_/\_\_\_\_.

The undersigned is attaching the receipt of the 100,00 € payment made to the Nelson Mandela  
Advanced School for Linguistic Mediators as an Exam Fee.

Matera, (date) \_\_\_\_\_

SIGNATURE \_\_\_\_\_