

**SISSA**Scuola  
Internazionale  
Superiore di  
Studi Avanzati**FORM B**

To the ACCOUNTING OFFICE

Object: Certificate of attendance at private summer schools in agreement with  
SISSA – year 2024.

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

As a parent/tutor/foster parent/parental responsibility holder of  
\_\_\_\_\_

## DECLARES

That the above-mentioned child has attended the summer school as indicated  
below:

From	To	Summer school name

and completed attendance.

The undersigned undertakes, upon payment **from SISSA**, to send the  
receipt/invoice issued by the summer school to [protocollo@sisa.it](mailto:protocollo@sisa.it) in .pdf format.The undersigned authorizes the processing of personal data, that will be used only  
for the procedures relevant to the granting of the contributions for the summer  
schools, in accordance with Law 196/2003 and the European Regulation 2016/679  
(General Data Protection Regulation).

Trieste,

\_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
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