## Proxy to request information on academic career

	Dear
	(Name of the university)
Name and Surname	
Gender: F   M   TAX Code	
Place of birth Address of residence	
City of Residence Province of residence	ence
Felephone numbere-mail	
Enrolled at	
Name of the course	
Student identification number:	
Гуре of degree:	
I AU	THORIZE
HABACUS S.r.L. based in Milano, Via Filippo Sassetti S request, for the duration of my studies, documents and i	, 156 10121 Torino, Partita IVA 11991500015 – also through 32 - 20124 Milano, VAT Registration number 04906910262- to information that confirm the payment of University/ course fees well as any other information relating to my academic career
Given the above, I authorize you to send via email to Information.	Habacus (to info@habacus.com) the required documents and
Best regards,	
Date:	Handwritten and legible signature
Place:	

Attached: valid and legible copy of ID Card (double side) in PDF format