



ATTACHED A
APPLICATION FOR PARTICIPATION IN THE SELECTION FOR ANNUAL SCHOLARSHIP

The undersigned.....
born in.....(.....) on .../.../.....
resident in.....(.....)address.....
tax code.....
phone number.....e-mail.....

Ask:

To participate in the selection for the award of an ANNUAL SCHOLARSHIP FOR
ATTENDING THE SPECIALIZATION COURSE IN PRINTMAKING 2024-2025

Attach:

- Curriculum Vitae
- Artistic Portfolio

Declares:

to accept all the provisions contained in the competition notice and expresses my consent
so that the personal data provided with the application can be processed exclusively for the
obligations connected to this procedure in compliance with the provisions of the Legislative
Decree. n. 196 of 30 June 2003.

This application must be signed and sent to school@ilbisonte.it in .pdf format

Place and Date.....

Signature.....

Il Bisonte Foundation

Art Gallery and International School of Printmaking
via del Giardino Serristori 13 rosso, 50125 Firenze
055 2342585 | info@ilbisonte.it | www.ilbisonte.it