

## Registration Form - Students 2015

All the fields must be filled in.

To be filled in **CAPITAL LETTERS**

### Course name (in priority order)

1<sup>st</sup>: \_\_\_\_\_

2<sup>nd</sup>: \_\_\_\_\_

3<sup>rd</sup>: \_\_\_\_\_

### Student's Information

IST Student's Number: \_\_\_\_\_ Course: \_\_\_\_\_

Full Name: \_\_\_\_\_

Gender: Female:  Male:  Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Birthplace: \_\_\_\_\_ Nationality \_\_\_\_\_

Fiscal Identification Number (if applicable): \_\_\_\_\_

National Identity Card n.º / Passport: \_\_\_\_\_ Issued by: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code:  -  \_\_\_\_\_

Qualifications: 1<sup>st</sup> Cycle Student  2<sup>nd</sup> Cycle Student  3<sup>rd</sup> Cycle Student

Other \_\_\_\_\_

Email: \_\_\_\_\_ Mobile:  : \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Signature \_\_\_\_\_

### Interest In Other Training Courses

I'm interested to be contacted for the following training courses: \_\_\_\_\_

Preferred Timetable to attend the courses: \_\_\_\_\_

**Obs: 80% of attendants is compulsory**

\*After filling in, send to:  
IST- Estrutura de Formação Contínua – [formação@tecnico.ulisboa.pt](mailto:formação@tecnico.ulisboa.pt)  
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