

## Registration Form - Students 2015

All the fields must be filled in.

To be filled in **CAPITAL LETTERS**

### Training Courses (in priority order)

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

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

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

4<sup>th</sup>: \_\_\_\_\_

5<sup>th</sup>: \_\_\_\_\_

### Student's Information

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

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

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

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

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

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

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: \_\_\_\_\_ : \_\_\_\_\_

### 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)

Tel: 21 841 75 01 - 21 841 94 34

Av. Rovisco Pais, 1049-001 Lisboa