



Puglia Region



European Union



ERDF OP PUGLIA 2007-2013 – PRIORITY AXIS IV, ACTION 4.3.1, LETTER C

ATTACHMENT B

PUGLIAEXPERIENCE 2010

The undersigned, _____ (surname and name)
 date of birth _____ place of birth _____
 Country _____
 Passport number _____
 Current address _____
 town / city _____ country _____ postcode _____
 Nationality _____

in case of admission to the 2010 PUGLIAEXPERIENCE agrees to attend the entire workshop during the period 3rd October – 22nd October 2010 except for absences due to health reasons which must be officially certified.

PLACE AND DATE

SIGNATURE
