



**ISTITUTO DI ISTRUZIONE SUPERIORE STATALE
"FLACCO-BATTAGLINI"
VENOSA**



**To the HEADMISTRESS
MIMMA CARLOMAGNO
I.I.S.S. "Flacco-Battaglini"
85029 VENOSA (PZ)**

FORM 1

- Form 1** has to be submitted only in case you need the I.I.S.S. "Flacco-Battaglini" to register your school on your behalf (**step 1**). In this case, please attach receipt of payment and send to both :
assistenza@liceovenosa.it luciareg@libero.it
- Step 2**: after the school registration you will receive on the registered school email-address the username and the password so that you can log in our website <https://www.liceovenosa.edu.it/scheda-progetto/certamen/> and complete the procedure

SCHOOL DATA (Please type or write in capital letters)

School Name _____

School Address _____

City and Nation _____

Tel. number _____

Fax number _____

Certified e-mail address _____

E-mail address _____

APPLICANT'S PERSONAL DATA

Surname _____

Name _____

F	M
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Age _____ Class _____ Place of residence _____

Birthplace _____

Date of birth _____

Full address _____

E-mail address _____

Passport/ID Card number _____

Tel. Number _____

Cell. Number _____

SEDI:

LICEO CLASSICO - SCIENTIFICO - MUSICALE - Via Emilia, 32 - 85029 Venosa (Pz)

IPSIA - Via degli Altavilla - 85029 Venosa (Pz)

CAT-BTA-AFM-PROFESSIONALE COMMERCIALE E SERALE -Via Accademia dei Rinascenti snc

pzis02100c@istruzione.it pzis02100c@pec.istruzione.it www.liceovenosa.edu.it

0972 - 207954 (LICEI)

0972 - 207898 (IPSIA)

0972-31686 (plesso BATTAGLINI)

C.F. 86002190766 C.M. PZIS02100C



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PARTICIPATING TEACHER'S PERSONAL DATA

Surname _____ Name _____ F M

Birthplace _____ Date of Birth _____

Full address _____

Cell. Number _____ E-mail address _____

1. LATIN TRANSLATION CONTEST

The under-mentioned applicant wishes to participate in the *XXXVII CERTAMEN HORATIANUM*

APPLICANT'S SURNAME	APPLICANT'S NAME	GENDER
		M <input type="checkbox"/> F <input type="checkbox"/>

Please, tick the chosen language accordingly

	FRENCH
	ENGLISH
	GERMAN
	PORTUGUESE
	SPANISH

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2. ARTISTIC COMPETITION

The under-mentioned applicant wishes to participate in the *XXXVII CERTAMEN HORATIANUM - ART SECTION*

APPLICANT'S SURNAME	APPLICANT'S NAME	GENDER
		M <input type="checkbox"/> F <input type="checkbox"/>

Please, tick the chosen box accordingly

- I will draw/paint using the following technique: _____

- I will use
 - a canvas
 - a drawing sheet

- I will use the following language for the technical report:

<input type="checkbox"/>	FRENCH
<input type="checkbox"/>	ENGLISH
<input type="checkbox"/>	GERMAN
<input type="checkbox"/>	PORTUGUESE
<input type="checkbox"/>	SPANISH

We understand and accept the attached 2025 *Certamen Horatianum* Regulations, the Entry Guidelines and the Privacy Forms A1+B/A2+B/C herewith attached. We grant permission for personal information to be used for this competition, according to Italian Law 196/2003, Reg. 2016/679, Dlgs. 101/2018 and following modifications.

THE ACCOMPANYING TEACHER

THE CANDIDATE

THE HEADMASTER

School stamp _____

Place and Date _____

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