

## BOCCONI RESIDENCE HALLS SPECIAL OPENING a.y. 2023-24

(Period: December 24, 2023 – January 2, 2024)

This form must be adequately filled, signed, and sent to housing@unibocconi.it within  $December 3^{rd}$ , 2023

I, the undersigned:	
NAME	
LAST NAME	
STUDENT ID N°	
assignee during a.y. 2023-24 of the room indicated below:	
Residence	Room number
hereby declare my willingness to remain in t of special opening, which is from December	the room I have been assigned to, during the period 24th, 2023 to January 2 <sup>nd</sup> , 2024.
For this purpose, I declare to be aware that d	uring the period of exceptional opening:
<ul> <li>The entrance of external guests is strict</li> <li>Some of the common kitchens may not</li> <li>No additional fees will be applied for the</li> </ul>	•
_	hat I read, accepted, and signed in the Bocconi and in the "Covid-19: Responsible behaviors
Date	Student's signature
	For minor students only
	Signature of the person exercising
	parental rights (please in this case attach a copy of the person's passport).
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