



Application Form

2025-2026

EMUNA ITALIA

Marital status			
Surname:			
Name:			
Date of birth:	Place of birth:		
Address:			
ZIP Code:	City:		
Telepone:			
E-mail:			

Current position				
Year Institution/Organization/Company		Position held		

Education				
Year	Degree	Institution		

Function directly related to your confession or culture (priest, imam, rabbi, academic, etc.)



Institute for European Analysis and Policy



Reason for applying					
Reason		Indicate one	or more reasons		
Personal					
Professional					
Per	sonal expectatio	ns for participation ir	n the program		
☐ Self-financing					
\square Funding by an institut	ion	□ Total	☐ Partial		
Name of the organization	1:				
Contact:					
Contact telephone numb	er:				
Billing address:					
Contact e-mail:					





To apply for the Emuna Italia program, please attach the following documentation:

- this form duly completed
- a personalized cover letter
- a CV
- a cover letter (for candidates who do not have an IT link)
- a copy of an identity document (front/back)

The application form complete with the above documentation must be sent by email to emunaitalia@gmail.com

no later than September 20, 2025.

Admission to the program will be communicated by September 30.

For any administrative information, please contact the Emuna Italia Secretariat at +39 06 85222351 or by mail: emunaitalia@gmail.com.

For participation in the program the **total cost is \in 1,000** (based on 16 training and the final event with a Luiss certificate at a cost of less than $\in 60$ each), which must be paid in full by October 1, 2025. If paid in **two installments, the cost is \in 1200** , with the first installment of $\in 600$ (by October 1, 2025) and $\in 600$ (by December 19, 2025).

The maximum limit of absences from seminar days and group projects (see https://leap.luiss.it/it/emuna/) **is three**, under penalty of losing the right to receive the certification issued at the end of the Emuna Italia training course. **The maximum limit of absences** from the presentation of the group's collective projects during the seminar days is **also three**, under penalty of losing the right to certification.

The payment must be made by bank transfer to:

Luiss Guido Carli - Viale Pola, 12 – 00198 Roma SWIFT BCITITMM IBAN: IT37U0306905060100000300001

Reason for payment: Contributo di partecipazione ai seminari di LUISS LEAP - EMUNA Italia





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community of belonging) with other studer am accepted as a student at Emuna Italia 2	·	ury of Emuna Italia, only when I myseli
I authorize	I deny authorization	
I authorize the publication of my data incomy telephone number).	licated above on the Emu	na Italia website (with the exception of
I authorize	I deny authorization	
Information on the processing of personal	data https://www.luiss.it/	informativa-trattamento-dati-personal
Date		
Signature		

I authorize Emuna Italia to share the data collected (Name, Surname, email address, telephone number,