

I, the undersigned \_\_\_\_\_  
born in \_\_\_\_\_ on ...../...../....., fiscal code \_\_\_\_\_  
resident in \_\_\_\_\_ ( ) street \_\_\_\_\_ n. \_\_\_\_\_,  
on behalf of \_\_\_\_\_  
as \_\_\_\_\_  
tax code. \_\_\_\_\_ VAT \_\_\_\_\_  
tel. \_\_\_\_\_ cell. \_\_\_\_\_ e-mail \_\_\_\_\_

ASK

that \_\_\_\_\_ can be entered as a **Partner** in Project **CEIF –  
Certification Education Infancy and Families** of which is responsible the no-profit Association  
I.S.P.E.F. *Istituto di Scienze Psicologiche dell' Educazione e della Formazione*, registered office in  
Rome, via D. Comparetti 55/A,

for the following reason \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, ...../...../.....

in witness



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The Executive Board of the I. S.P.E.F. , met on \_\_\_\_\_  
agree  
-----with the admission of \_\_\_\_\_  
desagree

as a **Partner** in Project **CEIF – Certification Education Infancy and Families**  
Rome, \_\_\_\_\_

I.S.P.E.F. President  
Dr. Fausto Presutti