

AGREEMENT BETWEEN

**LICEO ARTISTICO DI PORTA ROMANA E SESTO FIORENTINO E CORSO DI
PERFEZIONAMENTO**

Piazzale di Porta Romana , 9 Firenze

legally represented by the Dirigente Scolastico Dott.ssa Laura Lozzi

AND

THE ACADEMY OF FINE ARTS OF SARAJEVO

Obala Maka Dizdara 3, Sarajevo

legally represented by the Dean Prof. Dubravka Pozderac Lejlic

WHEREAS

The above-mentioned institutions agree to implement an academic cooperation programme between the two Institutions

THE PARTIES AGREE AS FOLLOWS:

Article 1 – Liceo Artistico di Porta Romana e Sesto Fiorentino e Corso di Perfezionamento and The Academy of Fine Arts of Sarajevo intend to promote scientific and academic cooperation by means of teacher training, communication, the teaching method for student and the exchange between students

Article 2 – Both Institutions are committed to collaborating in their academic activities. They also organize conferences and symposia on topics of common interest. To this end each Party guarantees access to its own research, academic and recreational structures to the visiting Party.

Article 3 – In the frame of the present Agreement, each Party will designate their own representative. The scientific and academic cooperation will be implemented through further written Agreements, subject to the approval of the academic boards.

Article 4 – The Academy of Fine Arts of Sarajevo and The Liceo artistico di Porta Romana e Sesto Fiorentino will pay all insurance costs of its own students, teachers and staff participating in the exchange programme, including accident insurance and third party civil liability insurance.

Article 5 – The students from the two institutions will be able to participate in the exchange program throughout the school/academic year

Article 6 – Both institutions agree to implement the professional academic lessons.

Article 7 – The partner institutions shall make every effort to reach an out-of-court settlement for any disputes that arise on signing or performing this Agreement.

Article 9 – This Agreement shall enter into force following its signature by all the contracting Parties. It

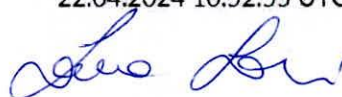
shall be binding upon the Parties hereto for a period of 5 years. The Agreement may be renewed or modified by means of a written notice approved by the academic boards. The Parties may withdraw from the present Agreement by giving a six months written notice prior to its expiration. In the event of termination of the Agreement, the projects in progress shall continue until the end of the current university year at the latest.

Article 10 – The present Agreement will be signed in three originals in English. Both parties will have one of the three for file.

LICEO ARTISTICO DI PORTA ROMANA E SESTO FIORENTINO E CORSO DI PERFEZIONAMENTO

LA DIRIGENTE SCOLASTICA Dott.ssa Laura Lozzi

LAURA LOZZI
22.04.2024 10:52:55 UTC



ACADEMY OF FINE ARTS OF SARAJEVO


Prof. Dubravka Pozderac Lejlic, Dean



Date: 22-04-2024

AC 2014

REPUBLICA ITALIANA
TESSERA SANITARIA
CARTA REGIONALE DEI SERVIZI

Codice Fiscale **LZZLRA67D50A369K** Sesso **F**

Cognome **LOZZI**

Nome **LAURA**

Data di scadenza **11/02/2022**

Luogo di nascita **ARCIDOSSO**

Provincia **GR**

Data di nascita **10/04/1967**

Dati sanitari regionali
REGIONE TOSCANA

Cognome **LOZZI**

Nome **LAURA**

nato il **10/04/1967**

(atto n. **7** **A** **As**)

a **ARCIDOSSO (GR)**

Cittadinanza **ITALIANA**

Residenza **EMPOLI**

Via **via A. Ponchielli, n. 5**

Stato civile **-----**

Professione **dirigente scolastico**

CONNOTATI E CONTRASSEGNI SALIENTI

Statura **1,67**

Capelli **biondi**

Occhi **castani**

Segni particolari **-----**



Firma del titolare **Laura Lozzi**

EMPOLI il **22/03/2016**

Impronta del dito indice sinistro **SILVIA DONATI**

DIR. SEGR, 0,26

IMP. FISSO, 5,16

TOT., 5,42



TESSERA EUROPEA DI ASSICURAZIONE MALATTIA

LOZZI

LAURA 10/04/1967

LZZLRA67D50A369K SSN-MIN SALUTE - 500001

80380000900096532866 11/02/2022



Scade il 10/04/2026
(art. 2, c.6 legge 16/06/1998, n.191)

AX 6247047

REPUBBLICA ITALIANA

COMUNE DI
EMPOLI

CARTA D'IDENTITA'

N° AX 6247047

DI
LOZZI
LAURA

IPZS. 144 - C.C.V. - ROMA

БОСНА И ХЕРЦЕГОВИНА
BOSNIA AND HERZEGOVINA

OSOBNA ISKAZNICA
ЛИЧНА КАРТА
IDENTITY CARD

PREZIME / ПРЕЗИМЕ /
SURNAME

POZDERAC-LEJLIĆ /
ПОЗДЕРАЦ-ЛЕЈЛИЋ

IME / IME /
GIVEN NAME

DUBRAVKA /
ДУБРАВКА

SPOL / ПОЛ /
SEX

Ž / Ж

DATUM ROĐENJA / DATUM РОЂЕНЈА /
DATE OF BIRTH

08.07.1967

VAŽ DO / VALUER DO / VALID DO /
VALID UNTIL

06.11.2024

SERUSKI BROJ / СЕРУСКИ БРОЈ / SERIAL NUMBER

280M06J60



DRŽAVLJANSTVO / ДРЖАВЉАНСТВО /
CITIZENSHIP

BIH / БИХ

POTPIS / ПОТПИС /
SIGNATURE

Signature of Dubravka Pozderac-Lejlic

MJESTO ROĐENJA / MJESTO РОЂЕНЈА / PLACE OF BIRTH

SARAJEVO /

CARAJEBO

OPĆINA PREBIVAJEŠTA / ОПШТИНА ПРЕБИВАЈЕШТА / MUNICIPALITY OF RESIDENCE

SARAJEVO CENTAR /

CARAJEBO ЦЕНТАР

NAĐLEŽNI ORGAN / NAĐLEŽNO ТУЕЛО / НАДЛЕЖНИ ОРГАН / ISSUING AUTHORITY

MUP KS, SARAJEVO CENTAR /

МУП КС, САРАЈЕВО ЦЕНТАР

ENTITETSKO DRŽAVLJANSTVO / ENТИТЕТСКО ДРЖАВЉАНСТВО / ENTITY CITIZENSHIP

JMB / JMBG / PERSONAL ID NUMBER

0807967175006

DATUM IZDAVANJA / DATUM ИЗДАВАЊА / DATE OF ISSUE

06.11.2014

KRVNA GRUPA / КРВНА ГРУПА / BLOOD TYPE

NAPOМЕНА / НАПОМЕНА / REMARK



IDBIH280M06J609<<<577863<<<<<
6707080F2411060BIH<<<<<<<<<8
POZDERAC<LEJLIC<<DUBRAVKA<<<<<