

SCUOLA
LEONARDO DA VINCI®
FLORENCE - MILAN
ROME - TURIN

Scuola Leonardo da Vinci® Educational Group
Officially authorised by the Italian Ministry of Education
Officially recognized as Professional Training Centers
Quality management system «ISO 9001:2015» certified by SQS-IQNET



* USA-AP



SCHOLARSHIP

2026

The scholarship is available at the discretion of the grant holder in one of the following locations:

Scuola Leonardo da Vinci® - Firenze

Via Bufalini 3, 50122 Firenze-Italia
Tel. +39-055.261181 • Whatsapp +39-370.3450630
firenze@scuolaleonardo.com • www.leonardo-florence.com

Scuola Leonardo da Vinci® - Milano

Corso di Porta Vigentina 35, 20122 Milano-Italia
Tel. +39-02.8324.1002 • Whatsapp +39-346.2179025
milan@scuolaleonardo.com • www.leonardo-milan.com

Scuola Leonardo da Vinci® - Roma

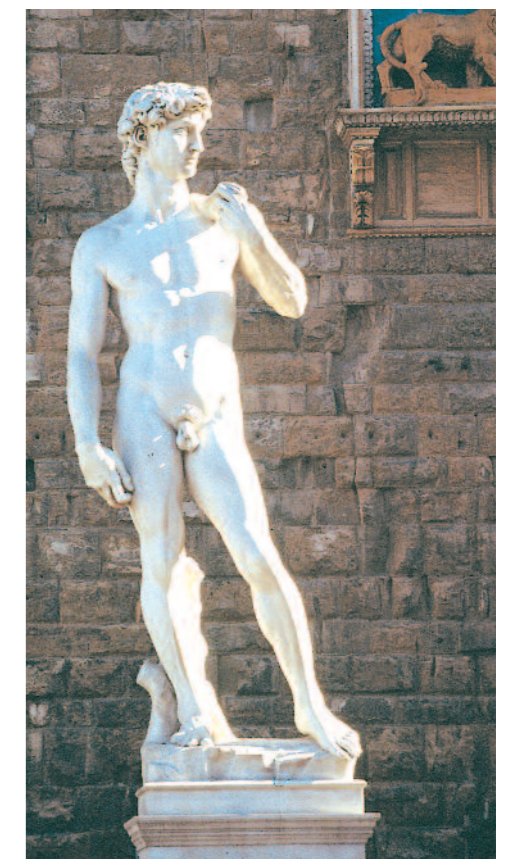
Piazza dell'Orologio 7, 00186 Roma-Italia
Tel. +39-06.6889.2613 • Whatsapp +39-366.2441949
rome@scuolaleonardo.com • www.leonardo-rome.com

Scuola Leonardo da Vinci® - Torino

Piazza San Carlo 206, 10121 Torino-Italia
Tel. +39-011.593872 • Whatsapp +39-349.8850223
turin@scuolaleonardo.com • www.leonardo-turin.com

Informazioni generali:

Scuola Leonardo da Vinci® - Marketing Office
Via Bufalini 3, 50122 Firenze-Italia
Tel. +39-055.290305 • Whatsapp +39-370.3340201
info@scuolaleonardo.com
www.scuolaleonardo.com



Scholarship 2026

• To be filled in by the student/grant holder •

Mrs. Ms. Mr.

FIRST NAME:

FAMILY NAME:

Place and date of birth:

Home address:

Phone: / Whatsapp: /

Email: Profession:

I wish to enrol at the school in: Florence Milan Rome Turin

I wish to enrol in the following course:

Course N°	Description	Starting date	Duration in weeks
112	Intensive Course		3

The school will reserve the following accommodation:

Shared apartment, single room, shared use of kitchen and bathroom for 20 nights (from Sunday before the beginning of the course until Saturday after the end of the course).

I hereby confirm that I have read and accepted the "Conditions of participation for grant holders":

Place and date _____ Signature of the grant holder _____

Please fill out also the following page 

N° studente

Data iscrizione

QUESTIONNAIRE FOR THE STUDENT/GRANT HOLDER

Have you already studied Italian? Yes No

Name and address of School / Institute:

Name of Italian teacher:

For how long did you study Italian?

_____ years _____ months _____ weeks for _____ hours/day

On which text book(s) you studied Italian?

Title(s) of text book(s)?

Why are you interested in studying Italian?

For professional reasons, which ones?

To study at an Italian School/University;
in which School/University would you like to study and which subject?

Because I like the language!

Other reasons:

CONDITIONS OF PARTICIPATION FOR GRANT HOLDERS - 2026

The scholarship is valid until December 2027.

This form must be sent, duly completed in all its parts, to the school office of SCUOLA LEONARDO DA VINCI® of your choice (see addresses on the first page), at least 6 weeks before the beginning of the course. In case the school accepts this application, the student will follow a free Intensive Course (No. 112) of Italian language and culture for 3 weeks (4 lessons per day from Monday to Friday), for a total of 60 lessons) on a date of her/his choice.

The minimum age for the participant is 18 years.

The scholarship includes accommodation for 3 weeks (20 nights, from the Sunday before the beginning of the course to the Saturday after the end of the course) in shared apartment, single room.

Travel expenses will be borne by the student.

The starting date of the course (scholarship), once agreed with the school, cannot be changed for any reason and the grant holder cannot be replaced by another person.

With the signature on the request of scholarship the participant confirms that she/he has read and accepted the "Conditions of participation for grant holders".