

Attachment B (Application Form)

To the Director
of the DIES
University of Udine
Via Tomadini 30/a- 33100 UDINE

I, THE UNDERSIGNED

Family name _____

(female applicants should indicate their maiden name)

Name _____

Born in _____ prov. _____
on _____ (foreign citizens must indicate the country of
origin) _____

Tax code nationality _____

domiciled in (give indication of the town, borough, street and house number of residence) _____
Post code _____ Province (county) _____

Country (if foreign) _____ Telephone number _____
e-mail _____

In view of the Announcement of the public selection procedure for the conferment of bursary for a graduate research position:

Head of research	
Title of the bursary	

ASK

To take part to said selection and, to that purpose, in the knowledge that false declarations are punishable under the provisions of art- 76 of the D. P. R. No. 445 of 28/12/2000 and that this Administration will be conducting random checks into the genuineness of the declarations made by the applicants,

DECLARE

under my own responsibility, pursuant to artt. 46-47 of D.P.R. 445/2000, to be in possession of:

a degree in _____ under the previous legislation

Or an equivalent qualification _____

laurea specialistica in _____ academic year _____

laurea magistrale in _____ academic year _____

obtained from _____
on _____ with the following result _____

academic qualification obtained abroad

From _____
on _____ with the following result _____ which I ask to be declared equivalent

(only if the degree has not yet been declared equivalent under the current legislation – refer to art. 2 of the present announcement)

to have read and accepted the conditions laid out in the present announcement concerning the conferment of the bursary, and in the “Internal Regulation in matters of graduate research schemes” of the University of Udine issued with Rectoral Decree 1701 of 19/12/2022;

to be aware that the status of recipient of the bursary is incompatible with what stated in art. 9 of the aforementioned Regulation;

that I am in no way related or related to marriage, within the fourth degree of kinship, to the Rector, the general Director, a member of the Board of Trustees of the University of Udine, the Head of research or a professor or researcher working for the department which hosts the programme to which the bursary is referred [or working, independently or within a department, in the same venue as that hosting the programme];

that I wish to receive communications about the proceedings at the address I have indicated, and that I will promptly inform the Administration of changes to my domicile (only if the domicile is different from the official residence)

Town _____ Street _____
No. _____ Post code _____ Province (County) _____ Country (if foreign) _____

Alternative name (*if different from the personal name*) to appear on correspondence: _____

The undersigned appreciates that the information given will be used, in compliance with Reg. UE 2016/679 “European laws regulating the protection of personal data”, to the purposes of the present competition.

The _____ undersigned _____ understands _____ that:
- The documents and publications submitted to the purposes of the competition will be available for collection at the dates and under the conditions indicated in art. 9 of the present announcement.

I, the undersigned, attach to the present form:

An Academic – professional Curriculum relevant to the position which is offered, dated and signed;

Publications, certificates, and other qualifications demonstrating my competence in relation to the research project (along with a list of said publications, certificates and qualifications, dated and signed);

Evidence that the candidate has conducted research activities for a public and/or private institution with a clear indication of the dates and duration of the employment.

A copy of the degree, if obtained abroad, complete with a list of the individual examinations undertaken and relative grades;

Photocopy of a valid identity document.

Date

The Declarer

Attachment C
Self-certification
Art. 46 DPR 28/12/2000 No. 445

SELF-CERTIFICATION

I, the undersigned (Family name and first name) _____
Born on _____ (province __) on _____
Domiciled at _____ Street _____ No. _____

In view of art. 46 of D.P.R. No. 445 of 28/12/2000, and in the knowledge that false declarations and the use of false documents are criminally punishable under the provisions of art. 76 of the D. P. R. No. 445 of 28/12/2000, and that the unfaithful declarer would be immediately divested from the position obtained on the basis of the unfaithful declaration

DECLARE

To be in possession of the following academic and professional qualifications:

I also append a photocopy of a valid identity document.

Read and undersigned

Date

Attachment D

List of documents and publications

I, the undersigned _____

In the knowledge that false declarations are criminally punishable under the provisions of art. 76 of the D. P. R. No. 445 of 28/12/2000, and that the Administration will be conducting random checks into the genuineness of the self-certifications made by candidates

APPEND THE DOCUMENTS AND THE PUBLICATIONS LISTED BELOW AND DECLARE THAT THE PHOTOCOPIES PRODUCED BELOW ARE A TRUE COPY OF THE ORIGINALS (pursuant to art.19 - D.P.R. 28/12/2000, No. 445)

1.	
2.	
3.	
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7.	
8.	
9.	
10.	

Date

The Declarer

Supplementary notes: In case of insufficient space, please continue on an attached paper by giving explicit indication in the list above.