Annex A to D.R. (Rector’s decree) no. 1143 del 24.07.2017  

(Application)

Attn: Magnifico Rettore
dell’Università degli Studi di Perugia
Ufficio Concorsi
P.zza dell’Università, 1
06123 PERUGIA

I, the undersigned (surname and name)______________________________
born in __________________________________________(province/district of ____________)
on (Date of birth dd/MM/yyyy)________________________
resident in __________________________________________(province/district of ________)
street address__________________________
postcode/ZIP________
Contact address chosen for the purposes of this competition:
City________________________________________________(province/district of __________)
street address _______________________________ (province/district of __________)
postcode/ZIP __________
telephone number________________ e-mail address________________________
certified e-mail address (PEC) ______________________________________

HEREBY REQUEST

to participate in the selection competition for the admission to the doctorate PhD course in:

I declare, under my own responsibility, in accordance (and for all legal intents and purposes) with articles 46 and 47 of the D.P.R. (President of the Republic’s Decree) 28.12.2000 no. 445¹:

a) ☐ that I am a citizen of _______________________________

b) ☐ that I have an adequate knowledge of the Italian language (see footnote²)

c) ☐ that I have a University degree in __________________________________________

  awarded on (conferral date dd/mm/yyyy) ________________

  by the University of __________________________

  with a final grade of ____________________________

¹ IN THE EVENT THAT THE BOXES ON THE APPLICATION FORM ARE NOT CORRECTLY VISUALIZED WHEN PRINTING OUT THE APPLICATION, CANDIDATES ARE STILL REQUIRED TO FILL IN ALL THE DECLARATIONS BY PLACING AN “X” NEXT TO THE LETTER PERTAINING TO THEIR SITUATION.

² (only for foreign citizens from countries within or outside the European Community, in the event that it is not possible to carry out the tests in a language different from Italian, in accordance with the specifications detailed in Appendix 1) : Mark the box ☐ with an “X”
Applicants who have obtained a qualification abroad must present an application for equivalence to the examining Commission in charge, said equivalence to be considered valid solely for the purposes of this selection, as detailed in Annex A/1.

OR

☐ that I haven’t yet graduated but I am about to obtain, by October 31, 2017

a degree in __________________________________________________________
awarded by the University of __________________________________________
on (indicate the expected conferment date - dd/mm/yyyy)____________________

d) ☐ that I know, for the purposes of the language test to take place during the interview, the following foreign language____________________________________(see footnote3)

e) ☐ that I wish to take the selection tests in a foreign language (only for the PhD courses for which this is applicable) ________________________________(see footnote4)

f) ☐ that I wish to be interviewed via videoconferencing, thereby indicating the following valid contact details for this purpose____________________________________(see footnote5)

g) ☐ that I commit to immediately communicate any changes in my residence or in the address that I have indicated as the contact address for all communications regarding this selection (see footnote6)

h) ☐ that I wish to apply for a reserved place, holding the following mandatory requirement/s:
   ________________________________________________________________(see footnote7)

i) ☐ that I do not have a formally certified disability

OR

☐ for disabled applicants: I hereby declare that I am disabled/have a specific learning disability and thus require the following:

- in accordance with articles 16 and 20 of Law no.104/1992, as modified by Law no.17/1999, special assistance/aids to carry out the tests, in the following forms:____________________________________

- in accordance with Law no.170/2010 with reference to specific learning disabilities, to be granted the following extra time to take the tests____________________________________(footnote8)

3 (only for those candidates applying for PhD courses for which, in accordance with the indications in Appendix 1 of the Call for Applications, it is possible to choose among more than one foreign language): Mark the box ☐ with an “X” and specify the foreign language for the purposes of the foreign language test to be tested during the interview

4 (only for PhD Programs that allow candidates to be tested in a language different from Italian, to be chosen among those specified in Appendix 1): Mark the box ☐ with an “X” in case you want to sit for the interview in a language different from Italian

5 (only for doctorate PhD courses for which, in accordance with the indications in Appendix 1 of the selection announcement, it is possible to be interviewed via videoconferencing): Mark the box ☐ with an “X” if you wish to be interviewed via videoconferencing and indicate a valid contact detail for this purpose

6 Mark the box ☐ with an “X”

7 (only for the doctorate PhD courses for which, in accordance with the indications in Appendix 1 of the Call for Applications, there are available reserved positions): Mark the box ☐ with an “X” and indicate proof of holding the requirements for the reserved places, as indicated in Appendix 1 of this Call.
j) ☐ that I give my consent, should the Administration receive motivated request to access the records and official documents regarding the present procedure and the undersigned is the person against whom the request is made, to being sent in digital form via email, at the email address indicated in the present application, in accordance with article 3 of the D.P.R. 184/2006, of the copy of the access request, withstanding the possibility to challenge, with a rightful motivation, said request, also by email, within 10 days after having received the afore-mentioned communication (footnote9)

k) ☐ that I accept all of the terms and conditions contained within the Call for Applications (footnote10).

Furthermore I, the undersigned, include the following attachments to the application (footnote11)

- 1. Identity document____________________________________________________
- 2. Form “B”___________________________________________________________
- 3. Form “C” – Curriculum Vitae________________________________________
- 4. Receipt of payment of € 60,00__________________________________________
- 5. __________________________________________________________________
- 6. __________________________________________________________________

I, the undersigned, declare to be aware of the following:

1. That this administration assumes no responsibility and shall not be liable for any postal or telegraphic delays or hurdles, regardless of the fact that they are caused by a third party, a fortuitous occurrence or circumstances beyond one’s control (force majeure) or in any occasion arising from an incorrect/missing indication of the address by the applicant or from failure on the candidate’s part to timely inform this administration of any changes in his/her address or other contact information.

2. Of the penal sanctions in which the undersigned would incur in case of false declarations or those that contain data that no longer correspond to the truth, as foreseen by article 76 of the D.P.R. 28.12.2000, no. 445.

3. Of article 75 of the D.P.R. 28.12.2000, no.445 regarding the relinquishment/loss of any benefits resulting from the action that is to be issued in the case that, following verification, the Administration were to find proof of false content in the above-mentioned declaration.

4. That, after four months from the publication on the University online billboard of the decree stating the approval of the competition procedures (the deferral period for judicial Terms/limitation period is not to be considered), and within the following two months, provided that no litigations or controversies are in progress, the candidates can collect the certificates and publications sent to the University of Perugia. After this period has passed the Administration will proceed to delete the above-mentioned documents from its archives.

The above-mentioned documentation can be returned directly to the applicant or by authorized proxy, according to article 11 of the Call for Applications.

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9 Fill in these fields only if the disability/specific learning disability is certified by a medical certification attesting also the kind of assistance/extra time needed; see art.3 of the Call for applications for details on how to submit the mandatory medical certifications.

9 Mark the box ☐ with an “X”

10 Mark the box ☐ with an “X”

11 List the documents attached to the application and required by article 3 of the Call for Applications.
Should the Administration, at any stage of the selection proceedings, request it, the undersigned commits to certify the declarations reported in the admission application, under his/her own responsibility and with the appropriate documentation as provided for by the law.

I, the undersigned, according to the D.Lgs. 196/2003 (Code of Regulations on the Protection and Processing of Personal Data) declare that I am aware that my data will be used by the University for institutional purposes and in compliance with the principle of pertinence.

Place and date ______________________

Signature ____________________________________________
Annex A/1 to the D.R. no. 1143 del 24.07.2017
(REQUEST FOR EQUIVALENCY TO AN ITALIAN ACADEMIC DEGREE)

TO THE EXAMINING BOARD OF THE PhD COURSE IN
........................................................................
........................................................................
UNIVERSITA' DEGLI STUDI DI PERUGIA

I, the undersigned (surname and name)_____________________________________
born in _________________________________ (Date of birth dd/MM/yyyy)_________
resident in _________________________________ in the province/district of _________
street address___________________________________________________________
Postcode/ZIP___________
Telephone number_________________ E-mail address:________________________
certified e-mail address (PEC) __________________________________________

Contact address chosen for the purposes of this competitive exam/selection:
City______________________________ province/district of _________________
Street address _________________________________
Postcode/ZIP __________
Telephone number_________________ E-mail address:________________________
certified e-mail address (PEC) __________________________________________

HEREBY FORMALLY REQUEST

The recognition of the equivalency to an Italian degree of my qualification obtained abroad, for the sole purposes of the admission to the Doctorate PhD course in:________________________________________________________

For this purpose please find attached the following documents:
.................................................................................................................(footnote12)

Place and date _________________

Signature________________________________________

12 (indicate the Degree that is attached, either the original certificate or an authenticated photocopy, along with an official translation in Italian and certified (where necessary) by the competent representing Italian diplomatic bodies or Italian consular authority abroad and a declaration regarding the evaluation called: “Dichiarazione di Valore” of the qualification obtained abroad provided by the competent representing diplomatic bodies or consular authority abroad).
Annex B of D.R. no. 1143 del 24.07.2017

SELF-CERTIFICATION STATEMENT

SELF-DECLARED AFFIDAVIT

The undersigned:
Surname __________________________ Name __________________________
(for women please indicate maiden name)
born in __________________(province/district ___________)
on (Date of birth dd/mm/yyyy ___________________
resident in __________________(province/district ___________)
street adress__________________________________________________ no.______

DECLARES
-TO HAVE THE FOLLOWING QUALIFICATIONS:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

LIewise DECLARES
- that the following documents, submitted in photocopy, conform to the originals 13

________________________________________________________________________

Finally DECLARES
- that what is stated in the C.V. is based on factual content and is true14

The undersigned declares to be aware of the penal sanctions in which he/she would incur should the declarations be untrue, mendacious or contain false data, in accordance with article 76 of the D.P.R. 28.12.2000 no. 445.
The undersigned declares to be aware of the contents of article 75 of the D.P.R. 28.12.2000, no.445 regarding the relinquishment/loss of any benefits resulting from the action that would follow in the case that, after performing background checks and verifications, the Administration were to find proof of mendacious and false contents in the above-mentioned declaration.
The undersigned, according to the D.Lgs. 196/2003 (Code of Regulations on the Protection and Processing of Personal Data) declares that he/she is aware that his/her personal data will be processed and used by this University for institutional purposes and in respect of the principle of pertinence.
The undersigned attaches a photocopy of his/her Identity Document. If the Identity document has expired, according with article 45 of D.P.R. 445/2000, the candidate must declare at the bottom of the photocopy of the ID that the data indicated in it have not changed since its date of issuance.

__________________________
(place and date)

Signature_______________________________________

13 Provide a detailed list of the documents (e.g. scientific publications, degree thesis, or other qualifications) which are submitted in photocopy.
14 Only declare this if the Curriculum Vitae is submitted.
EUROPEAN CURRICULUM VITAE FORMAT

PERSONAL INFORMATION

Name
Address
Telephone
Fax
E-mail

Nationality
Date of birth

WORK EXPERIENCE

• Dates (from – to)
• Name and address of employer
  • Type of business or sector
  • Occupation or position held
• Main activities and responsibilities

EDUCATION AND TRAINING

• Dates (from – to)
• Name and type of organization providing education and training
• Principal subjects/occupational skills covered
• Title of qualification awarded
• Level in national classification (if appropriate)
PERSONAL SKILLS
AND COMPETENCES
Acquired in the course of life and career but not necessarily covered by formal certificates and diplomas.

MOTHER TONGUE

OTHER LANGUAGES
- Reading skills
- Writing skills
- Verbal skills

SOCIAL SKILLS
AND COMPETENCES
Living and working with other people, in multicultural environments, in positions where communication is important and situations where teamwork is essential (for example culture and sports), etc.

ORGANIZATIONAL SKILLS
AND COMPETENCES
Coordination and administration of people, projects and budgets; at work, in voluntary work (for example culture and sports) and at home, etc.

TECHNICAL SKILLS
AND COMPETENCES
With computers, specific kinds of equipment, machinery, etc.

ARTISTIC SKILLS
AND COMPETENCES
Music, writing, design, etc.

OTHER SKILLS
AND COMPETENCES
Competences not mentioned above.

DRIVING LICENCE(S)

ADDITIONAL INFORMATION
[ Include here any other information that may be relevant, for example contact persons, references, etc. ]

ANNEXES
[ List any attached annexes to the Curriculum Vitae. ]
I, the undersigned (surname and name) hereby declare that this Curriculum Vitae states only true and factual content, according with articles 46 and 47 of D.P.R. 445/2000. I also declare to be aware of the penal sanctions in which I would incur should the declarations be untrue, mendacious or contain false data, in accordance with article 76 of the D.P.R. 28.12.2000 no. 445. Additionally, I also declare to be aware of article 75 of the D.P.R. 28.12.2000, no.445 regarding the relinquishment/loss of any benefits resulting from the action that would follow in the case that, after performing background checks and verifications, the Administration were to find proof of mendacious and false contents in the above-mentioned declaration. I hereby attach, for this purpose, a copy of a currently valid ID document.

………………………………
(Place and date)

--------------------------------------------------------------------------
Signature 15

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15 The signature (handwritten) is mandatory. The omission of the aforementioned signature will result in the declaration being considered null and void.
(This part is to be filled out in case the application form, along with the pertinent documentation, are handed in directly to the Archives and Protocol Office - "Ufficio Archivio e Protocollo " of this University)

I hereby confirm that on today’s date Mr/Ms______________________________ handed in their application to participate in the public selection for the admission to the Doctorate PhD course in______________________________ - XXXIII cycle - Academic Year 2017/2018 – of the University of Perugia.

Perugia,  

Stamp of the Protocol Office  
and signature of the official who receives the application