

**Al 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 of \_\_\_\_\_)  
on (Date of birth dd/MM/yyyy) \_\_\_\_\_  
resident in \_\_\_\_\_ (province of \_\_\_\_\_)  
street \_\_\_\_\_ Post Code/ZIP \_\_\_\_\_  
postal address chosen for the purposes of this competitive exam:  
city \_\_\_\_\_ (province of \_\_\_\_\_)  
street \_\_\_\_\_ Post Code/ZIP \_\_\_\_\_  
telephone number \_\_\_\_\_ e-mail address \_\_\_\_\_  
certified e-mail address (PEC) \_\_\_\_\_

**HEREBY MAKE A FORMAL REQUEST**

to participate in the selection to be admitted on the doctorate PhD course in:

**I declare under my own responsibility, in accordance with and for all legal intents and purposes of articles 46 and 47 of the D.P.R. (President of the Republic's Decree) 28.12.2000 no. 445<sup>1</sup>:**

- a)  that I am a citizen of \_\_\_\_\_  
b)  that I have an adequate knowledge of the Italian language (footnote<sup>2</sup>)  
c)  that I have a degree in \_\_\_\_\_  
awarded on (conferral date) \_\_\_\_\_ by the University  
of \_\_\_\_\_ with a final grade of \_\_\_\_\_

<sup>1</sup> **IN THE EVENT THAT DURING PRINTING THE BOXES ON THE APPLICATION FORM CANNOT BE SEEN, CANDIDATES ARE REQUESTED TO REPLY ANYWAY TO ALL OF THE DECLARATIONS REQUIRED BY PLACING AN X NEXT TO THE LETTER PERTAINING TO THE SITUATION IN WHICH THE CANDIDATE FINDS HIM/HERSELF.**

<sup>2</sup> (only for foreign citizens from countries within or outside the European Community, in the event that is not possible to carry out tests in a language different from Italian, in accordance with the indications in Appendix 1 of the selection announcement) : Put a X in the box

(Applicants who have a qualification obtained abroad must present an application for equivalence to the panel of judges which deals with this, solely for the purposes of the selection, as indicated in attachment A/1)

or

that I haven't yet graduated, but I am about to take, by October 31, 2014

a degree in \_\_\_\_\_

on (insert the expected conferral date) \_\_\_\_\_ by the University of \_\_\_\_\_

d) that I know, for the purposes of the language test during the interview, the following foreign language \_\_\_\_\_ (footnote<sup>3</sup>)

e) that I wish to be interviewed via videoconferencing, indicating the following contact details as valid for this purpose \_\_\_\_\_ (footnote<sup>4</sup>)

f)  that I am obliged to communicate as soon as possible any change in my residence or in the address I have indicated as the postal address for communication regarding this selection (footnote<sup>5</sup>)

g)  that I wish to apply for a reserved place, holding the following requirements \_\_\_\_\_ (footnote<sup>6</sup>)

h)  for disabled applicants: I declare that I am disabled and require the following:

- in accordance with art.16 and 20 of Law no.104/1992 as modified by Law no.17/1999, assistance to carry out the tests \_\_\_\_\_

- in accordance with Law no.170/2010, extra time to carry out the tests \_\_\_\_\_ (footnote<sup>7</sup>)

i)  that I give my consent, should the Administration receive motivated request for access to the records regarding the present proceedings and the undersigned assumes the role of counter-party, to being sent by telecommunication at the email address indicated in the present application, according to article 3 of the D.P.R. 184/2006, copies of the communication notifying the request for access and has the possibility of presenting

<sup>3</sup> (only for those applying for PhD courses for which, in accordance with the indications in Appendix 1 of the selection announcement, it is possible to choose among more than one foreign language): Put a X in the box  and specify the foreign language for the purposes of the foreign language test at the interview

<sup>4</sup> (only for the 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): Put a X in the box  if you wish to be interviewed via videoconferencing and indicate valid contact details for this purpose

<sup>5</sup> Put a X in the box

<sup>6</sup> (only for the doctorate PhD courses for which, in accordance with the indications in Appendix 1 of the selection announcement, there are reserved places): Put a X in the box  and indicate proof of holding requirement for reserved places Call as indicated in Appendix 1 of the selection announcement

<sup>7</sup> Fill in these fields only if disabled with medical certification attesting assistance/extra time needed; see art.3 of selection announcement.

motivated opposition to the said request, even by email, within 10 days of receiving the said communication (footnote<sup>8</sup>)

j)  that I accept all of the provisions contained within the selection announcement (footnote<sup>9</sup>).

Furthermore, the undersigned includes the following attachments (footnote<sup>10</sup>)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_

The undersigned declares to be aware of:

1. That the administration assumes no responsibility for any postal or telegraphic delays or in any occasion arising from an inexact indication of the address by the applicant or from the lack of or delay in communicating any changes in the address indicated in the application.

2. Of the penal sanctions he/she incurs in the case of declarations which are false or 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 of any benefits resulting from the action issued in the case that, following verification, the Administration should find proof of non-truth in the content of the above-mentioned declaration.

4. That, **after four months have passed from the date of the publication on the University's online notice-board of the provision for approval of the deeds of the selection, not calculating the period of suspension of the legal deadlines, and within the following two months**, unless there is a disagreement in act, the candidates must arrange for collection of the certificates and any publications sent to the University of Perugia. When this period has elapsed the Administration will proceed to eliminate the above-mentioned documents from its archives.

Restitution will be carried out directly to the interested party or to a person who presents an authorizing proxy, according to article 11 of the selection announcement.

*If the Administration, at any stage of the proceedings of the selection, should ask, the undersigned promises to certify the declarations made in the application to be admitted to the selection, under his/her own responsibility with the appropriate documentation, by law.*

The undersigned, according to the D.Lgs. 196/2003 (code regarding the protection of personal data) declares that he/she is aware that his/her own details will be used by the University for institutional purposes and in respect of the principle of competence.

Place and date \_\_\_\_\_

Signature \_\_\_\_\_

<sup>8</sup> Put a X in the box

<sup>9</sup> Put a X in the box

<sup>10</sup> Indicate the documents required by article 3 of the selection announcement.

**Appendix A/1 of the D.R. no. \_\_\_\_\_ dated \_\_\_\_\_**  
**(REQUEST FOR EQUIVALENCE OF QUALIFICATION)**

**TO THE EXAMINING BOARD OF THE  
DOCTORATE PhD COURSE IN**

.....  
.....  
**UNIVERSITA' DEGLI STUDI DI PERUGIA**

I the undersigned \_\_\_\_\_ (surname and name)  
born in \_\_\_\_\_ on (Date of birth dd/MM/yyyy) \_\_\_\_\_  
resident in \_\_\_\_\_ in the province of \_\_\_\_\_  
street \_\_\_\_\_ PostCode/ZIP \_\_\_\_\_  
Telephone number \_\_\_\_\_ E-mail address: \_\_\_\_\_  
certified e-mail address (PEC) \_\_\_\_\_

**postal address chosen for the purposes of this competitive exam/selection:**

City \_\_\_\_\_ province of \_\_\_\_\_  
Street \_\_\_\_\_ Post Code/ZIP \_\_\_\_\_  
Telephone number \_\_\_\_\_ E-mail address: \_\_\_\_\_  
certified e-mail address (PEC) \_\_\_\_\_

*HEREBY MAKE A FORMAL REQUEST FOR*

**Recognition of the equivalence to an Italian degree of my qualification obtained  
abroad, for the sole purposes of admission to the Doctorate PhD course  
in: \_\_\_\_\_**

For this purpose please find attached the following documents:

\_\_\_\_\_ *(footnote<sup>1</sup>)*

Place and date \_\_\_\_\_

signature \_\_\_\_\_

<sup>1</sup> (indicate the qualification certificate that is attached, either the original certificate or an authenticated photocopy, complete with an accompanying official translation in Italian and certified (where necessary) by the competent representing diplomatic bodies or Italian consular 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 abroad.

**DECLARATION SUBSTITUTING CERTIFICATION**  
(Art. 46 of D.P.R. 28.12.2000, no. 445)

**DECLARATION SUBSTITUTING NOTARY DEED**  
(Art. 47 of D.P.R. 28.12.2000, no.445)

The undersigned:

Surname \_\_\_\_\_ Name \_\_\_\_\_

(for women indicate maiden name)

born in \_\_\_\_\_ (province \_\_\_\_\_) on (Date of birth dd/MM/yyyy \_\_\_\_\_)

resident in \_\_\_\_\_ (province \_\_\_\_\_)

street \_\_\_\_\_ no. \_\_\_\_\_

**DECLARES**

**-TO POSSESS THE FOLLOWING QUALIFICATIONS:**

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**DECLARES LIKEWISE**

- that the documents that follow, presented in photocopy, conform to the original<sup>1</sup>

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**finally DECLARES**

- that what is stated in the C.V. corresponds to the truth<sup>2</sup>

The undersigned declares to be aware of the penal sanctions he/she incurs in the case of false declarations or declarations which contain data that does not correspond to the truth, as foreseen by article 76 of the D.P.R. 28.12.2000 no. 445.

The undersigned declares to be aware of article 75 of the D.P.R. 28.12.2000, no.445 regarding the relinquishment of any benefits resulting from the action issued in the case that, following verification, the Administration should find proof of non-truth of the content of the above-mentioned declaration.

The undersigned, according to the D.Lgs. 196/2003 (code regarding the protection of personal data) declares that he/she is aware that his/her personal details will be used by the University for institutional purposes and in respect of the principle of competence.

**The undersigned attaches a photocopy of his/her Identity Card/Passport.** If the Identity card or passport is not valid, for the purposes of 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 on it have not changed since the date of issue.

\_\_\_\_\_  
(place and date)

Signature \_\_\_\_\_

<sup>1</sup> Provide a detailed list of the documents (for example scientific publications, degree thesis, or other qualifications) which are presented in photocopy form.

<sup>2</sup> Only make this declaration if the C.V. is presented.

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**(to be completed if the application form and documentation is handed in directly to the University's Archives and Protocol Office- "Ufficio Archivio e Protocollo ")**

I hereby testify that on today's date Mr/Ms \_\_\_\_\_  
handed in their application to participate in the public selection for admission to the Doctorate  
PhD course in \_\_\_\_\_ XXX cycle - academic year  
2014/2015 - at the University of Perugia.

Perugia,

Stamp of the Protocol office and initials of the official  
who receives the application