Annex A to D.R. (Rector's decree) no. 1 1 4 2 (APPLICATION) 1 9 LUG. 2016

Attn: 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/district	c of)
on (Date of birth dd/MM/yyyy)	<u> </u>	
resident in	(province/dis	trict of)
street address		
postcode/ZIP		
Contact address chosen for the purposes	of this Call for Applications:	
City	(province/district of	f)
street address		
postcode/ZIP		
telephone number	e-mail address	
certified e-mail address (PEC)		
HEREBY I to participate in the selection for the adm	FORMALLY REQUEST ission to the doctorate PhD cou	ırse in:
I declare, under my own responsibil purposes) with articles 46 and 47 of 28.12.2000 no. 4451:		~
a) that I am a citizen of		
b) that I have an adequate knowledge		(see footnote ²)
c) \Box that I have a University Degree in	or the Italian language	(see foothole)
awarded on (conferral date dd/mm/y		

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 indications in Appendix 1): Mark the box \square with an "X"

	(Applicants who have a qualification obtained abroad must present an application for
ϵ	
	equivalence to the examining Commission in charge, said equivalence to be considered
1	valid solely for the purposes of this selection, as indicated in Annex A/1)
(OR
[□ that I haven't yet graduated but I am about to obtain, by October 31, 2016
i	a degree in
i	awarded by the University of
(on (indicate the expected conferral date dd/mm/yyyy)
d)	☐ that I know, for the purposes of the language test to be taken during the interview, the
ſ	following foreign language(see footnote ³)
e) 1	☐ that I wish to take the selection tests in a foreign language (only for the PhD courses for
,	which this is applicable) (see footnote ⁴)
f) [□ that I wish to be interviewed via videoconferencing, thereby indicating the following valid
	contact details for this purpose(see footnote ⁵)
g)	☐ that I am aware of my duty and 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 footnote ⁶)
h)	$\hfill \square$ that I wish to apply for a reserved place, holding the following necessary requirements:
	(see footnote ⁷)
i)	□ that I do not have a formally certified disability
	OR
	\square 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(footnote ⁸)

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 at the interview

⁴ (only for the 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 PhD programs for which, in accordance with the indications in Appendix 1 of the selection announcement, it

only for PhD programs 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 \square 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"

 $^{^{\}circ}$ (only for PhD programs for which, in accordance with the indications in Appendix 1 of the Call for Applications, there are available reserved places): Mark the box \Box with an "X" and indicate proof of holding the requirements for the reserved places as indicated in Appendix 1 of this Call.

- j) In 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, 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) \Box 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 (footnote ¹¹)

-	1. Currently valid ID document
-	2. Form "B"
-	3. Form "C" - Curriculum Vitae (Resume)
-	4. Receipt of payment of € 60,00
-	5
-	6

- I, the undersigned, declare to be aware of the following:
- 1. That the administration assumes no responsibility and shall not be liable for any postal or telegraphic delays or hurdles, 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, this 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 selection 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, in accordance with article 11 of the Call for Applications.

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 present the mandatory medical certifications.

⁹ Mark the box 🗆 with an "X"

¹⁰ Mark the box □ with an "X"

¹¹ Indicate 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. 1 1 4 2 1 9 LUG. 2016 (REQUEST FOR EQUIVALENCY TO AN ITALIAN ACADEMIC DEGREE)

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/district of
street address	
Postcode/ZIP	
Telephone number	E-mail address:
Contact address chosen for the purpose	s of this Call for Applications:
City	province/district of
Street address	
Postcode/ZIP	
Telephone number	E-mail address:
certified e-mail address (PEC)	
HEREBY FO	DRMALLY REQUEST
The recognition of the equivalency to a	n Italian degree of my academic qualification
obtained abroad, for the sole purposes in:	of the admission to the Doctorate PhD course
For this purpose please find attached the fol	lowing documents:
	(footnote ¹²)
Place and date	
and the second of the second o	
Si	gnature

¹² (indicate the <u>academic Degree</u> that has been attached, either in original certificate or notarized copy, along with an <u>official translation</u> in Italian and certified (where necessary) by the competent representing Italian diplomatic bodies or Italian consular authority abroad along with the <u>declaration called: "Dichiarazione di Valore"</u> (Declaration of Academic Value) of the academic qualification obtained abroad provided by the competent representing diplomatic bodies or consular authority abroad.

Annex B of D.R. no. 1 1 4 2 19 LUG. 2016

SELF-CERTIFICATION STATEMENT (Art. 46 of D.P.R. 28.12.2000, no. 445) SELF-DECLARED AFFIDAVIT (Art. 47 of D.P.R. 28.12.2000, no.445)

The undersigned:	
Surname	Name
(for married women: please indicate maiden na	me)
born in(province/district)
on (Date of birth dd/mm/yyyy	
resident in	(province/district)
street adress	no
-TO POSSESS THE FOLLOWING QUALIFICA	ARES TIONS:
	DECLARES
- that the documents that follow, presented in	pnotocopy, conform to the original
•	DECLARES
- that what is stated in the C.V. is based on fac	tual content and is true ¹⁴
should the declarations be untrue, mendacious 76 of the D.P.R. 28.12.2000 no. 445. The undersigned declares to be aware of the no. 445 regarding the relinquishment/loss of a follow in the case that, after performing Administration were to find proof of mendacideclaration. The undersigned, according to the D.Lgs. 196/Processing of Personal Data) declares that he/treated and used by the University for institution.	e penal sanctions in which he/she would incur for contain false data, in accordance with article contents of article 75 of the D.P.R. 28.12.2000, any benefits resulting from the action that would g background checks and verifications, the ous and false contents in the above-mentioned 2003 (Code of Regulations on the Protection and she is aware that his/her personal details will be cional purposes and in respect of the principle of
document has expired, according with articl	f his/her Identity Document . If the Identity e 45 of D.P.R. 445/2000, the candidate mus ID that the data indicated in it have not changed
Signature_	
Signature	

¹³ Provide a detailed list of the documents (e.g. scientific publications, degree thesis, or other qualifications) which are presented in photocopy.

14 Only declare this if the Curriculum Vitae (Resume) is presented.

Annex C to p.R (Rector's decree) no. 1 1 4 2 1 9 LUG. 2016

EUROPEAN CURRICULUM VITAE FORMAT



PERSONAL INFORMATION

Name

[LAST NAME, FIRST NAME, other name(s) if applicable]

Address

[House number, street address, ZIP/postcode, city, country]

Telephone

Fax

E-mail

Nationality

Date of birth

[Day, month, year]

WORK EXPERIENCE

• Dates (from - to)

[Add separate entries for each relevant post occupied, starting with the most recent.]

- · Name and address of employer
 - Type of business or sector
 - Occupation or position held
- · Main activities and responsibilities

EDUCATION AND TRAINING

• Dates (from - to)

[Add separate entries for each relevant course you have completed, starting with the most recent.]

- Name and type of organisation providing education and training
- Principal subjects/occupational skills covered
 - Title of qualification awarded
- Level in national classification (if pertinent)

PERSONAL SKILLS AND COMPETENCES

Acquired in the course of life and career but not necessarily covered by formal certificates and diplomas.

MOTHER TONGUE

[Specify mother tongue]

OTHER LANGUAGES

[Specify language]

• Reading skills

[Indicate level: excellent, good, basic.]

Writing skillsVerbal skills

[Indicate level: excellent, good, basic.] [Indicate level: excellent, good, basic.]

[Describe these competences and indicate where they were acquired.]

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

[Describe these competences and indicate where they were acquired.]

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

[Describe these competences and indicate where they were acquired.]

AND COMPETENCES With computers, specific kinds of

equipment, machinery, etc.

ARTISTIC SKILLS

[Describe these competences and indicate where they were acquired.]

AND COMPETENCES

Music, writing, design, etc.

OTHER SKILLS

[Describe these competences and indicate where they were acquired.]

AND COMPETENCES
Other competences not mentioned

Other competences not mentioned above.

DRIVING LICENSE(S)

ADDITIONAL INFORMATION

[Include here any other information that may be relevant, for example contacts, references, etc.

ATTACHEMENTS

[List any attachements.]

[

	I, the undersigned (last name and first name) here declare that this Curriculum Vitae states only true and factual content, in accordance warticles 46 and 47 of D.P.R. 445/2000. I also declare to be aware of the penal sanctions in whill 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 article 75 of the D.P.R. 28.12.2000, no.445 regarding the relinquishment/loss of any beneficially from the action that would follow in the case that, after performing background check 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 document.		anctions in which a, in accordance to be aware of of any benefits okground checks
(Place and date)	Signature ¹⁵		···

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)

Perugia,

Stamp of the Protocol Office and initials of the official who has received the application