(APPLICATION FORM)

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 of _____)

on (Date of birth dd/MM/yyyy)_____

resident in _____(province/district of _____)

street address_____

postcode/ZIP_____

Contact address/domicile chosen for the purposes of this competition:

City_____(province/district of _____)

street address _____

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:

PHOTOINDUCED PROCESSES AND TECHNOLOGIES

titles of three project themes indicated in order of preference (chosen from those listed in Annex 1 to the announcement):

Topic title _____

Topic title _____

Topic title _____

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. 445[1]:

☐ that I am a citizen of _____

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[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.**

☐ that I have an adequate knowledge of the Italian language (see footnote[2])

☐☐ that I have:

- o **Master's degree ('Laurea Specialistica')** in accordance with the ministerial decree D.M. 509/1999,
- o **Master's degree ('Laurea Magistrale')** in accordance with the ministerial decree D.M. 270/2004,
- o **University diploma ('Laurea Vecchio ordinamento')** obtained in accordance with regulations in place before the ministerial decree D.M. 509/1999 came into force

- o **academic qualification obtained abroad**

in compliance with the specifications, for each doctoral program, reported in Appendix 1 of the present

Call pertaining to the acceptable degrees required for admission

in _____

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

    by the University of_____

    with a final grade of _____

(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 **September 19, 2022**

a degree in _____

awarded by the University of _____

on (indicate the expected conferment date - dd/mm/yyyy)_____

☐ that I know, for the purposes of the language test to take place during the interview, the following foreign language_____(see footnote[3])

☐ 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])

☐ to want to take the interview via videoconference for the following reasons _____ (request likely to be accepted, considering the reasons given, by the Commission of selection, if it decides to carry out the interview in presence) (see footnote[5])

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[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"

[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] Mark the box ☐ with an "X"

☐ 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 footnote[6])

☐ that I possess the required qualifications to compete for a reserved place, namely: _____(see footnote[7])

☐ that I do not have a formally certified disability

OR

☐ for applicants with disabilities: 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])

☐ 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.R184/2006, 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 aforementioned communication (footnote[9])

☐ that I accept all of the terms and conditions contained within the Call for Applications (footnote[10]).

Furthermore I, the undersigned, include the following attachments to the application (footnote[11])

- 1. Identity document_____
- 2. Form "B"_____
- 3. Form "C" – Curriculum Vitae_____
- 4) Further qualifications or titles: (please complete digitally or in legible block letters):

    ……………………………………………

    ……………………………………………

    ……………………………………………

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[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.

[8] 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.

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

- 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.

- 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.

- 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.

- 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.

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.

The undersigned, in accordance with Regulation (EU) 2016/679 and Leg.Dec. 2003/196, as last amended by Leg. Dec. 2018/101, declares to be aware that his/her personal data will be handled by the University for institutional purposes and in respect of the principle of pertinence

Place and date _____

Signature

(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 _____on (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/domicile 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:

_____*(footnote[12])*

Place and date _____

Signature_____

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[12] (indicate diploma attached, in the original or authenticated copy, accompanied by its official and legalized (where necessary) translation in Italian by the competent Italian diplomatic representatives or consulates abroad, and, alternatively, the certificate of comparability of the foreign degree issued by CIMEA-NARIC ITALIA, or the "dichiarazione di valore" (declaration of value) of the foreign degree issued by the competent Italian diplomatic representatives or consulates abroad.

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 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**:
_____
_____

LIKEWISE 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 true[14]

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, in accordance with Regulation (EU) 2016/679 and Leg.Dec. 2003/196, as last amended by Leg. Dec. 2018/101, declares to be aware that his/her personal data will be handled by the 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_____

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[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.

**E U R O P E A N
C U R R I C U L U M   V I T A E
F O R M A T**

PERSONAL INFORMATION

Name	**[SURNAME, FIRST NAME, and, if applicable, other name(s)]**
Address	**[House number, street name, 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 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

[Specify mother tongue]

OTHER LANGUAGES

[Specify language]
- Reading skills — [Indicate level: excellent, good, basic.]
- Writing skills — [Indicate level: excellent, good, basic.]
- Verbal skills — [Indicate level: excellent, good, basic.]

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.

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

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.

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

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

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

ARTISTIC SKILLS AND COMPETENCES

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

Music, writing, design, etc.

OTHER SKILLS
AND COMPETENCES
Competences not mentioned above.

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

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]

(NOTE: The signature is required for the curriculum to be valid)

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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.