(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	rn 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 purp	oses 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:			
I declare, under my own responsibility, in acc and 47 of the D.P.R. (President of the Republi	ordance (and for all legal intents and purpose ic's Decree) 28.12.2000 no. 445 ¹ :	es) with articles 46		
☐ that I am a citizen of				
$\hfill\Box$ that I have an adequate knowledge of the It	alian language	(see footnote ²)		
22 that I have:				
• • •	a') in accordance with the ministerial decree D ') in accordance with the ministerial decree D. N	•		

 $^{^1}$ 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 \square with an "X"

- 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
□ th	nat I haven't yet graduated but I am about to obtain, by September 19, 2022
a de	egree in
awa	arded by the University of
on ((indicate the expected conferment date - dd/mm/yyyy)
□ th	hat I know, for the purposes of the language test to take place during the interview, the following foreign
lang	guage(see footnote ³)
□ tł	hat I wish to take the selection tests in a foreign language (only for the PhD courses for which this is
арр	olicable) (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 t	the Commission of selection, if it decides to carry out the interview in presence) (see footnote ⁵)
□th	nat I commit to immediately communicate any changes in my residence or in the address that I have indicated
as t	he 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)
□ th	nat I do not have a formally certified disability
Call and ⁴ (or thos ent	nly for those candidates applying for PhD courses for which, in accordance with the indications in Appendix 1 of the for Applications, it is possible to choose among more than one foreign language): Mark the box □ with an "X" dispecify the foreign language for the purposes of the foreign language test to be tested during the interview only for PhD Programs that allow candidates to be tested in a language different from Italian, to be chosen among see 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 with an "X".

 $^{^{\}rm 6}$ Mark the box \square 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 \Box with an "X" and indicate proof of holding the requirements for the reserved places, as indicated in Appendix 1 of this Call.

-	_	_
•	٦	D
ı	,	п

		applicants wi			hereby de	clare tha	t I am disal	bled/have a	specific	learning d	isability and
th	us re	equire the follo	owing:								
	-	in accordanc	e with	articles	16 and 20	of Law no	o.104/1992	2, as modifi	ed by La	w no.17/1	999, special
		assistance/a	ids	to	carry	out	the	tests,	in	the	following
		forms:									
	-	in accordance	ce with	Law no	170/2010	with refe	rence to s	pecific learı	ning disa	bilities, to	be granted
		the	follo	wing	ext	ra	time	to)	take	the
		tests							(footnot	e ⁸)	
docun made, cordai challer mention that Further - 1. - 2.	to kence vange, one control laco	re my consent, is regarding the peing sent in control of the peing sent in control of the peing and the peing and the peing to the peing	e pres digital of the I I motiv ion (fo terms rsigned	ent proc form via D.P.R184 ration, sa otnote ⁹) and cond	edure and email, at t /2006, of t id request, ditions context.	the under he email he copy of also by e tained wi	ersigned is address in of the acce mail, with thin the Calments to	the persor ndicated in ss request, in 10 days a all for Applica	n against the pres withstan fter havi cations (foc	whom thent applicating the part of the par	e request is ation, in accossibility to ed the afore-
- 3.	Forr	n "C" – Currici	ulum V	'itae	12:						
		n "D" – Resea n "F" – declar	-	oject (no	ta ¹²)						
•											
·							,		,		
I, the i	unde	ersigned, decla	ire to k	oe aware	of the follo	owing:					

- 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

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 \square with an "X"

 $^{^{\}mbox{\tiny 10}}$ Mark the box \square with an "X"

 $^{^{\}mbox{\tiny 11}}$ List the documents attached to the application and required by article 3 of the Call for Applications.

¹² produrre un modello "D" per ogni progetto di ricerca che il candidato voglia presentare

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)

				IN	1	MINING BOARD (
				 Ul	NIVERSITA	' DEGLI STUDI DI	PERUGIA	
I, the undersig	gned (sui	name and	name)					
born in				on (Da	te of birth	dd/MM/yyyy)		
resident in				in the	e province/	district of	stre	et
address							-	
Postcode/ZIP_								
Telephone nu	mber		E-m	nail addres	ss:			
certified e-ma	il addres	s (PEC)						
Contact addre	ess/dom	icile chose	n for the purpos	ses of this	competitiv	e exam/selectio	n:	
City				provi	nce/distric	t of		
Street address	s							
Postcode/ZIP								
Telephone nu	mber		E-r	mail addre	ess:		certi	fied e-mail
address (PEC)								
			HEREBY I	FORMALLY	' REQUEST			
	_			_		fication obtained		
purposes in:	of	the	admission	to	the	Doctorate	PhD	course
			ched the followi					
						(footn	ote ¹³)	
Place and date	e							
			S	ignature_				-

¹³ (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(provi	nce/district)	
on (Date of birth dd/mm/yyyy		
resident in	(province/district)
street adress	no	
-TO HAVE THE FOLLOWING QUALIF	DECLARES FICATIONS:	
- that the following documents, sub	LIKEWISE DECLARES mitted in photocopy, conform to the originals ¹⁴	
	Finally DECLARES	
- that what is stated in the C.V. is ba	used on factual content and is true ¹⁵	
rations be untrue, mendacious or cono. 445. The undersigned declares to be awa the relinquishment/loss of any ben performing background checks and false contents in the above-mention. The undersigned, in accordance with	th Regulation (EU) 2016/679 and Leg.Dec. 2003/196 aware that his/her personal data will be handled	oe D.P.R. 28.12.2000 Oo, no.445 regarding the case that, after of mendacious and as last amended by
according with article 45 of D.P.R. 4	opy of his/her Identity Document. If the Identity do 45/2000, the candidate must declare at the bottom ave not changed since its date of issuance.	
(place and date)	Signature	

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

ANNEX "C

EUROPEAN CURRICULUM VITAE FORMAT



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 em-

ployer

- Type of business or sector
- Occupation or position held
- Main activities and responsi-

bilities

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

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

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.

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

AND COMPETENCES

ARTISTIC SKILLS

Music, writing, design, etc.				
OTHER SKILLS AND COMPETENCES Competences not mentioned above.	[Describe th	ese competences and ii	ndicate where they w	rere acquired.]
Driving Licence(s)				
ADDITIONAL INFORMATION	_	e any other informatior references, etc.]	n that may be relevan	t, for example con-
Annexes	[List any atta	ached annexes to the Cu	urriculum Vitae.]	
]				
and 4 which false Addit no.44 tion t verifi conte	um Vitae states of 47 of D.P.R. 445/20 h I would incur she data, in accordantionally, I also decented that would follow ications, the Adments in the above-	undersigned nly true and factual co 000. I also declare to be ould the declarations b ce with article 76 of the clare to be aware of art elinquishment/loss of a in the case that, after pe inistration were to fine mentioned declaration s purpose, a copy of a c	e aware of the penal e untrue, mendaciou e D.P.R. 28.12.2000 no icle 75 of the D.P.R. ny benefits resulting erforming background proof of mendacion	n articles 46 sanctions in s or contain o. 445. 28.12.2000, from the acdichecks and us and false
(Place and date)				
ALOTE The size of	Contract to	Signature	16	
(NOTE: The signature is required	Jor the curriculum	i to be valia)		

¹⁶ The signature (handwritten) is mandatory. The omission of the aforementioned signature will result in the declaration being considered null and void.