



APPLICATION FORM A

PERSONAL SWORN DECLARATION (ART. 46, D.P.R. N. 445/00):

I, the undersigned, _____ born on _____
 in _____ (_____) and resident in _____
 _____ Address _____

Fully aware of the penal sanctions in the case of false declarations and the consequent forfeiture of the benefits obtained (pursuant to articles 75 and 76 of Presidential Decree 445/2000) for which I take complete personal responsibility

DECLARE, UPON PRESENTATION OF THIS CANDIDACY:

the wish to candidate myself **(It is possible to select one or more of the following options, subject to the admission requirements specified in the Call):**

1.
 - For an ordinary University scholarship place
 - For a scholarship place with increased funding, reserved for international candidates with residency abroad and with qualification for the Doctoral Program obtained abroad
 - For a scholarship place without funding, reserved for officials working for public institutions

2.
 - To be a resident in Italy
 - OR**
 - to be a resident abroad, specifically in



- 3.
- to have NOT had residency or domicile in Italy or to have carried out my main activity in Italy, for more than 6 months, even non-consecutively, in the three years preceding this Call for Applications
 - OR**
 - to have had residency or domicile in Italy or to carried out my main activity in Italy, for more than 6 months, even non-consecutively, in the three years preceding this Call for Applications
- 4.
- To have obtained my Master’s degree (or equivalent) at the following University:
.....located in.....
 - OR**
 - To have NOT yet obtained my Master’s degree (or equivalent), with the full expectance that this degree will be awarded to me by 16 September 2022 at the following University:located in.....
- 5.
- To be an employee of a Public Institution, namely
 - OR**
 - To NOT be an employee of a Public Institution

The undersigned also declares, pursuant to art. 13 of Legislative Decree no. 196 of 30 June 2003, that I have been informed that the personal data contained in this declaration will be processed, also with IT tools, exclusively in the context of the procedure for which this declaration is made.

Finally, the undersigned declares to have read the information referred to in Articles 13 and 14 of Regulation (EU) 2016/679 d.d. April 27, 2016 (GDPR).

Place and Date _____ Signature of Declarant _____

This declaration does not require signature authentication and effectively replaces the normal certifications required or intended for a Public Administration as well as for managers of public services and private individuals who allow it.