APPLICATION FORM
PH.D. PROGRAM XXXVI CYCLE
SCIENCE AND TECHNOLOGY FOR ENVIRONMENT AND HEALTH
(WITH HEADQUARTERS AT THE UNIVERSITY OF SANNIO)

To the Rector
University of Sannio
Piazza Guerrazzi, n. 1
82100 Benevento

(For precise instructions, please refer to article 3 of the Call for Competition and the PhD Info Sheets (annex A)

The

undersigned_____
                                         SURNAME   NAME

gender (M/F) ___ born at _____ on _____

resident in _____ address _____ Postal Code _____

tel._____mobile_____e-mail address_____

ask to apply to Ph.D. Program in *"Science and Technologies for Environment and Health"* :

   ORDINARY POSITIONS *(choose one of the topic listed in the Ph.D. data sheet – Annex A)*

   Research topic_____

   _____;

   POSITION with scholarship funded by MUR (PON-FSC);

   POSITION with scholarship funded by INPS (only for sons or orphans of public employees in Italy);

I hereby declare under my responsibility, according to articles 46 and 47 of the Decree of the President of the Republic n. 445 of December 28, 2000, to be aware of the penal sanctions set by article 76 of the same Decree for falsity of acts or false declarations.

I declare:

a) To be _____ citizen;
b) (*for candidates with an Italian degree*) to hold a Diploma di Laurea/Laurea Specialistica/Laurea Magistrale in _____ awarded on_____

with marks _____ at the University_____;

c) (*for candidates with a foreign degree*) to hold a_____ degree on _____ awarded on _____, which has been declared equivalent to the Italian degree _____
by_____ on _____ (*in case the applicant does not possess such declaration, he/she must enclose all documents useful to the Admission Committee to establish adequacy of the degree for admission to the chosen Ph.D. course, as indicated in Article 3 , paragraph 8 of the Call for Competition*);

d) (*for undergraduates in their final year*) that I will be awarded the _____ degree on _____

on _____ by the University _____
(*the degree has to be awarded by the deadline set at article 2 paragraph 5 of the Call for Competition*);

e) to choose the following language for the admission exam (*Italian or English*) _____;

f) my commitment to attend full-time the Ph.D. program for which I applied, according to the rules laid down by the Academic Board;

g) to accept all the provisions contained in the Call and in the University Regulations for the Establishment and Organization of Ph.D. programs.

(The applicant must declare the above <u>under penalty of exclusion</u>)

Indication of up to three professors or researchers to write reference letters **(Referees must send their letters to <u>dottorati@unisannio.it</u> by the seventh day prior to the written exam (where required) or the oral exam):**

- _____;

- _____;

- _____.

I select for communications regarding the procedure the following address: (street and number) _____, postal code _____, City and Country _____, e-mail address_____. I agree to communicate promptly any change.

I hereby authorize the competent Administrative Offices to handle my personal data pursuant to the <u>Regolamento generale sulla protezione dei dati</u> (GDPR, *General Data Protection Regulation- Regolamento UE 2016/679).*

I acknowledge that the University of Sannio has the right to ascertain, in any phase of the procedure and also after enrollment, the truthfulness of my declarations.

Date _____

Signature

_____