Application for participation in the Selection Procedure for the conferral of one (1) research and study grant, entitled: “………………………………………………………………………….”

**To: Director General**

**University of Camerino**

**Via D’Accorso, 16**

**(University Campus)**

**62032 Camerino (MC), Italy**

The Undersigned, ……………………………………………………………………………., born in ………….………….……… on ……./……/…….. , and residing in……………………………… (ZIP Code……….….) at (Street name) ………………………………………… Street No. …….… *Phone No.* ……………..……………. *Mobile No.* ……………..………………. *E-mail: …………………………..@……………………*, Tax ID Code ................................................................ is applying for participation in the public Selection procedure for the conferral of a research and study grant at this University, entitled:

*“.............................................................................................................................................”*,launched by Decision of Director General No. ...................... of ………/………/2021.

To this end, the Undersigned, assuming full responsibility, aware that making false statements, uttering forged instruments, or making use of the same, is punishable as a felony, pursuant to Article 76 of Presidential Decree No. 445/2000), declares the following:

* To hold the following degree (please state the exact name of the degree) …………………………………………………. obtained from the University of …………………………………………… on (date) …………………………;
* To hold the following preferential qualifications: …………………………………..………….

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(*non-mandatory requirement*);

* To have specific skills / experience in ........................................................................... documented by: ............................................................................................................................

(*non-mandatory requirement*);

* To not have been a scholarship or research grant holder (pursuant to Unicam Regulations for the conferral of post-graduate scholarships and research grants) for a period longer than three years, even if not consecutive;
* To be aware of the fact that the grant referred to in this Notice may not be combined with any other grants, conferred for any reason or purpose;
* To be aware of the fact the grant referred to in this Notice is not compatible with participation in PhD programmes with scholarships or grants, or with participation in Medical Specialty programmes, in Italy or abroad; with research grants; and with employment contracts, without prejudice to the possibility that the grant holder may be placed on unpaid leave;
* To have no criminal charges/convictions (otherwise, please indicate your criminal charges/convictions below) ……………….……………………………………………………;
* To be a citizen of one of the Member States of the European Union, i.e., ………………………………………………………………………………………………..;
* di To be domiciled, for the purposes of this Selection procedure, in ………………………… (ZIP code………………) Street name: ……………………...…………….… Street No. ……

The Undersigned undertakes to promptly communicate any changes in contact details indicated above.

The Undersigned attaches the following:

1. …………………………………………………………………………………………………
2. …………………………………………………………………………………………………
3. …………………………………………………………………………………………………
4. …………………………………………………………………………………………………

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Privacy Notice pursuant to Art. 5 of European Regulation GDPR No. 679/2016: Personal data of applicants who want to participate in the selection procedures shall be processed for institutional purposes and in compliance with the legislation on the protection of personal data, which is based on the principles of accuracy, lawfulness, transparency, and the and need for the protection of fundamental rights and freedoms. In particular, these data will be processed, also with the aid of electronic means, by subjects specifically appointed for the purposes inherent to the management of this administrative procedure and the legal obligations envisaged. The data controller is Prof. Claudio Pettinari, Rector and legal representative of the University of Camerino, domiciled for this position at Piazza Cavour 19/F – 62032 Camerino (MC) Certified E-mail (P.E.C.) protocollo@pec.unicam.it Tel. 0737/402003. The Data Protection Manager is Mr. Stefano Burotti, E-mail: rpd@unicam.it, Certified E-mail (P.E.C.): rpd@pec.unicam.it, Tel. 0737/402015.

Date:…………………………..

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARATION IN LIEU OF AFFIDAVIT**

(Pursuant to Art. 47 of Presidential Decree No. 445 of 28 December 2000)

The Undersigned**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 (Last Name) (First Name)

born in ( ), on ,

(City/Town) (Prov.)

residing in ( ), at ,

 (City/Town) (Prov.) (Street Name and No.)

aware that making false statements, uttering forged instruments, or making use of the same, is punishable as a felony, pursuant to Art. 76 of Presidential Decree No. 445 of 28 December 2000,

**DECLARES**

**\_** .

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**\_** .

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I declare that I have been informed that, pursuant to and for the purposes of Art. 10 of Law No. 675/96, the personal data that I have provided will be processed, also by means of IT tools, exclusively within the scope of the procedure for which this declaration is made.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 (Place and Date)

 The Declarant **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 (Full and legible signature)

The signature at the bottom of this page does not have to be authenticated

Pursuant to Art. 38 of Presidential Decree No. 445 of 28 December 2000, this Declaration has been signed by the interested party in the presence of an authorised employee, or has been signed and sent to the competent office, by fax, through a representative, or by mail, together with an unauthenticated photocopy of an identification document of the Declarant.

Note: all documents, other than those that can be self-certified, pursuant to Art. 46 o Presidential Decree No. 445/2000, may be the subject of a Declaration in lieu of affidavit.

Therefore, by means of a Declaration in lieu of affidavit, the following may be certified:

- the facts, personal qualities and situations of which the person concerned is aware, and which are not included in the list of self-certifiable data with a declaration in lieu of certification.

- compliance of the copy of a document issued by a public administration, of a publication, or a qualification, with the original (Art. 19 of Presidential Decree No. 445/2000).

Qualifications/publications, the compliance of which with the original is being certified, may be included in a single Declaration in lieu of affidavit, but must be expressly indicated, since a generic expression, such as “… all the documents/publications attached to the application comply with the original…” is not sufficient.

By way of example, below are some wordings that can be transcribed in the facsimile of a Declaration in lieu of Affidavit:

• a copy of the following publication entitled: ………………………………………… published by: …………………………………………… reproduced in full/extract from page ………….. to page …………., and therefore consisting of (number) ………….. sheets, complies with the original.

• a copy of the following deed/document: …………………………………………………….. archived at/issued by public administration body ...………………………………………., consisting of (number) …… sheets, complies with the original.

• a copy of the qualification / collaboration (employment) certificate: ………………………………………………, issued by …………………………………………… on …………, complies with the original.

• for the publication entitled ………………………………………………………………, the legal deposit was carried out by ………………………………………………………….

(please indicate the name, or the name of the company, and the domicile or the headquarters of the subject with the obligation of deposit)