



UNIVERSITÀ
DI CAMERINO

ANNEX "2"

DECLARATION IN LIEU OF CERTIFICATION
(Art. 46 of Presidential Decree No. 445 of 28 December 2000)

The Undersigned,

LAST NAME _NAGOTH_
(for female applicants, please indicate the maiden name)

NAME _Joseph Amruthraj

aware that making false statements, uttering forged instruments, or making use of the same, is punishable as a felony, pursuant to Articles 75 and 76 of Presidential Decree No. 445/2000),

DECLARES TO BE IN POSSESSION OF THE FOLLOWING DEGREES:

1) University degree (indicate if it is a Master's degree, or a Specialist degree, or an old-system / single-cycle degree, and state the full name of the degree).

- _ a) Master of Philosophy (Mphil) in Plant Biology and Plant Biotechnology
- b) Master of Science (M.Sc) in Biotechnology

Administration
www.unicam.it
TAX CODE: 81001910439
VAT No. 00291660439
protocollo@pec.unicam.it

Division of Human Resources, Organisation and Development
Via Gentile III Da Varano
62032 Camerino (Italy)
Tel. +39 0737 402024.
e-mail: anna.silano@unicam.it



UNIVERSITÀ
del CAMERINO

(choose one of the following options):

- Obtained in Italy, from the University of __
(state the name of the University), on _____;
- Obtained abroad, from the University of __ (a,b) Loyola College, Autonomous and affiliated to
the University of Madras. _
(state the name of the University), on _a) September-2013_b) April-2012

1) PhD degree (state the full name of the degree)

__ Doctor of Philosophy (PhD) in Clinical, Experimental and Medical Sciences __

(choose one of the following options):

- Obtained in Italy, from the University of _ University of Campania, Luigi Vanvitelli (Italy
Naples) __
(state the name of the University), on _15 th December-2016 __;
- Obtained abroad, from the University of _____
(state the name of the University), on _____;

Place and Date: Camerino 30/11/2020...

Signature:

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UNIVERSITÀ
BICAMERINO

ANNEX "3"

DECLARATION IN LIEU OF AFFIDAVIT

(Articles 19 and 47 of Presidential Decree No. 445 of 28 December 2000)

The Undersigned,

LAST NAME NAGOTH

(for female applicants, please indicate the maiden name)

NAME Joseph Amruthraj

aware that making false statements, uttering forged instruments, or making use of the same, is punishable as a felony, pursuant to Articles 75 and 76 of Presidential Decree No. 445/2000,

DECLARES THE FOLLOWING:

a) Additional qualifications (Master's degrees, post-graduate specialisations, certificates of participation in training or refresher courses relating to the title of the project), other than the degree required for participation in the procedure:

- Qualification Postdoctoral Research assistant (state the name of the qualification), obtained from School of Cell Biology and Cell Biotechnology, Department of Biosciences and Veterinary Medicine. , on 18/01/2018-2019 ;

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- Qualification **"Horizon 2020 Marie Skłodowska-Curie Research and Innovation Staff Exchange Evaluations (RISE)", H2020-MSCR-RISE.** (state the name of the qualification), obtained from **Acibadam Mehmet Ali Aydinar University school of medicine (Epigenetiks -EPI), Istanbul (Turkey).**, on **01/06/2018**;
- Qualification **Postdoctoral Research trainee In Experimental on animal models** (state the name of the qualification), obtained from **IRCCS Istituto Nazionale Tumori Fondazione G Pascale.**, on **18/01/2017-2018**;
- Qualification **Project on "Standardization of In house-ELISA for the detection of IgG antibodies to Toxoplasma gondii"** (state the name of the qualification), obtained from **Vidyasagar institute of Biomedical Technology, a unit of medical research foundation in Microbiolog, Chennai, India**, on **31/03/2012**;
- Qualification **HANDS ON SUMMER TRAINING PROGRAM IN "MOLECULAR TECHNIQUES"** (state the name of the qualification), obtained from **Vidyasagar institute of Biomedical Technology, a unit of medical research foundation in Microbiolog, Chennai, India**, on **13/05/2011**;
- Qualification **Bachelor of Science (B.sc) in Plant Biology&Plant Biotechnology** (state the name of the qualification), obtained from **Loyola College, Autonomous and affiliated to the University of Madras**, on **April-2010**;
- Qualification **INTERNSHIP IN THE FIELD OF "IMMUNOTECHNOLOGY AND PLANT TISSUE CULTURE"** (state the name of the qualification), obtained from **Shreedhar Bhats Laboratory (K-BITS) Bangluru**, on **18/01/2010**;



b) Professional experience in public and/or private institutions:

1) Name of the Public Institution or name and identification data (registered office, tax code /VAT No.) of the private employer:

_____;

2) Type of employment:

(choose one of the following options):

- Employee;

If you selected "Employee", please state below the employee classification level/category:

_____;

- Self-employed;

- Internship.

3) Period and duration of the employee / self-employed / intern status: from _____

to _____;

4) Brief job description:

Place and Date: Camerino, 30/11/2020

Signature: _____