## ANNEX 1)

## TO THE DIRECTOR

DEPARTMENT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The undersigned\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ASKS**

to participate in the comparative evaluation by qualifications and interview for the assignment of a non-occasional self-employment assignment as a Chief Scientific Officer lasting 12 months in support of the Project Decade Collaborative Centre for Coastal Resilience (DCC-CR) **Chief Scientific Officer job**.

To this end, it declares under its own responsibility, that everything indicated in this request corresponds to the truth, pursuant to art. 46 of Presidential Decree no. 445/2000:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SURNAME |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| NAME |  | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| BIRTH DATE |  | | | |
|  |  | | | | | | | | | | | |
| BIRTH LOCATION |  | | | | STATE | | |  | | | | | | |
|  |  | | | | | | | | | | | |
| RESIDENT |  | | | STATE | | |  | | | | ZIP | | | | | | | |  | |
|  |  | | | | | | | | | | | |
| STREET |  | | | | | N. | | |  | | | | | | | |
|  |  | | |  |  |  |  |  | |  | |  | |  | |  | |  | | | |
|  |  | | | | | | | | | | | |
| ITALIAN CITIZENSHIP | | YES | NO | | | | | |
|  |  | | | | | | | | | | | |
| EUROPEAN CITIZEN: COUNTRY OF BIRTH | |  | | | | | | |
|  |  | | | | | | | | | | | |
| NON-EUROPEAN CITIZEN | |  | | | | | | |

|  |  |  |
| --- | --- | --- |
| CRIMINAL CONVICTIONS (a) | NO |  |
|  | YES | WHICH\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**REQUIREMENTS:**

1. ACADEMIC TITLES:
2. **The level and title denomination obtained** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Issued by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTRY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Achieved on (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to be in possession of the declaration of equivalence issued pursuant to current legislation on the subject

to attach to this application a translation into Italian of the foreign qualification, accompanied by a self-declaration of conformity with the original of the translation

- NOT to be related or similar (up to and including the fourth degree) with a professor belonging to the structure that requires the stipulation or with the Rector, the General Manager or a member of the Board of Directors of the University;

- not to be in early retirement of seniority pursuant to art. 25 of Law 724/1995;

- possess qualified professional experience and skills of at least\_12 months in public bodies or private organisations in relation to the subject matter of the contract;

- not having reported criminal convictions and / or not having pending criminal proceedings such as to determine situations of incompatibility with the task to be carried out. Otherwise indicate which \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

- to declare in the curriculum attached to the application for participation the qualifications that are intended to be submitted for the purpose of their evaluation.

|  |  |  |
| --- | --- | --- |
| Physically challenged | YES |  |
|  | NO |  |

and need the following help \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to elect their domicile for communications regarding this selection in

|  |  |  |  |
| --- | --- | --- | --- |
| STREET |  | N. |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CITY |  | STATE |  | ZIP |  |

|  |  |
| --- | --- |
| TELEPHONE |  |
| MOBILE |  |
| E-MAIL |  |

|  |  |
| --- | --- |
| AT |  |

The undersigned attaches to this application a photostatic copy of a valid identity document.

The undersigned expresses his consent so that the personal data provided can be processed in compliance with Regulation (EU) 2016/679 and Legislative Decree no. 196/2003 ss.mm.ii for the obligations related to this procedure.

Date, Signature

Attach to this application your **dated and signed** curriculum vitae and declare that everything indicated in it corresponds to the truth pursuant to Article 46 of Presidential Decree 445/2000 and that any attached photocopies are in accordance with the original pursuant to Article 47 of Presidential Decree 445/2000.

Date, Signature