



ANNEX 1)

To the Head of the

_____ Department

The undersigned _____

HEREBY ASKS

to participate in the comparative procedure, based on qualifications for the appointment of a self-employed worker on an occasional basis, pursuant to and for the purposes of article 2222 et seq. of the Italian Civil Code in order to meet the needs of _____

To this end, he/she declares under his/her own responsibility that everything in this application is true, pursuant to article 46 of Italian Presidential Decree 445/2000:

SURNAME

NAME

DATE OF BIRTH

PLACE OF BIRTH PROV.

RESIDENT IN PROV. **POST**

STREET No.

ITALIAN CITIZENSHIP

YES	NO
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EU CITIZENS: citizenship

NON-EU CITIZENS: citizenship

ELECTORAL ENROLMENT
(Only for Italian citizens)

YES	Municipality: _____
NO	Why _____



CRIMINAL CONVICTIONS (a)

NO
YES

List _____

REQUIREMENTS:

- Degree qualification:

➤ **Previous system:** _____

Issued by _____

_____ Country _____

Awarded on

--

 Mark:

➤ **New system:** _____

pertaining to the second cycle degree class

Issued by _____

_____ Country _____

Awarded on

--

 Mark:

- Foreign degree qualification:

➤ **Title and level of degree qualification awarded** _____

Issued by _____

_____ Country _____

He/she is in possession of the declaration of equivalence issued in accordance with the applicable laws in force

The application is accompanied by a translation in Italian of the foreign degree qualification, which in turn is self-certified to be a true representation of the original

- He/she is NOT related (up to and including the fourth degree of consanguinity) to a professor within the Department that has requested the appointment, or to the Rector, the Director General or a member of the Board of Governors of the University

- He/she has not taken early retirement pursuant to art. 25 of Italian Law 724/1995

- He/she has gained qualified professional experience and skills of a duration of at least _____ in public bodies or private organisations in relation to the scope of the _____ contract

- He/she has adequate knowledge of Italian (if the candidate is a foreign citizen)



- He/she does not have any pending criminal proceedings such that would be incompatible with the appointed work to be carried out Otherwise, any pending proceedings must be indicated here:

- The curriculum attached to the application contains the declaration of which qualifications the candidate intends to submit for assessment

He/she is disabled

YES
NO

and requires the following assistance _____

➤ The candidate's address for correspondence for the purposes of this selection procedure is:

STREET No.

MUNICIPALITY PROV. *POST CODE*

TELEPHONE
MOBILE
ADDRESS
E-MAIL

C/O

The undersigned has attached a photocopy of a valid identity document to this application.

The undersigned gives his/her consent to the processing of his/her personal data in accordance with Regulation (EU) 2016/679 and Italian Legislative Decree 196/2003, as amended, for the purposes related to this procedure.

Date _____ Signature _____

The undersigned has attached his/her **signed and dated** curriculum vitae, and declares that all the information contained therein is truthful in accordance with art. 46 of Italian Presidential Decree 445/2000 and that any photocopies included are true copies of the original in accordance with art. 47 of Italian Presidential Decree 445/2000.

Date,

Signature