

“ANNEX B”

SUBSTITUTE CERTIFICATION STATEMENTS (art. 46 DPR n. 445/2000)
SUBSTITUTE DECLARATIONS OF THE DEED OF NOTORIETY (art. 47 DPR n. 445/2000)

The undersigned

SURNAME _____ NAME _____
FISCAL CODE _____ CITIZENSHIP _____
BORN IN _____ PROV. _____ ON _____
RESIDING IN _____ PROV. _____
ADDRESS _____ ZIP CODE _____
TELEPHONE _____ CELL. _____
EMAIL: _____
P.E.C. (compulsory) _____

aware of the criminal liability that it may incur in the event of a false declaration

DECLARES*:

<input type="checkbox"/> To be in possession of the requirements referred to in letter a) of art. 3 of the Call (Title obtained in Italy)
<input type="checkbox"/> To be in possession of the requirements referred to in letter b) of art. 3 of the Call (Title obtained abroad)
<input type="checkbox"/> To be in the condition referred to in letter c) of art. 3 of the Call (title to be obtained by 10/31/20)
<input type="checkbox"/> To be able to access the scholarship (annual income lower than 16,000 Euros)
<input type="checkbox"/> That the undersigned is not in a position to access the scholarship (annual income lower than 16,000)
<input type="checkbox"/> To be the author / co-author of the publications listed in Annex “C” and that those - attached in PDF format to the application - conform to the original ones.
<input type="checkbox"/> To have actually carried out the training and research activities indicated in Annex "B2" which consists of no. ____ of sheet / s.
<input type="checkbox"/> To have actually carried out participation in national and international research groups indicated in Annex "B3" which consists of n. ____ of sheet / s.
<input type="checkbox"/> To have actually carried out the activity of speaker at national and international conferences and conventions indicated in Annex "B4" which consists of n. ____ of sheet / s.
<input type="checkbox"/> To possess the language skills indicated in Annex "B5".
<input type="checkbox"/> To have attached in PDF format, for the purposes of what is indicated in the sixth paragraph of Article 7 of the Call, the documents listed in Annex "B6" which consists of n. ____ of sheet / s and that the same documents conform to the original ones.

** the declaration choice is made by ticking the box to the left of the item of interest, in case of non-choice in one or more categories the related elements possibly attached will not be subject to evaluation.*

The undersigned also declares to be informed that the personal data collected will be processed exclusively in the context of the procedure for which they are given.

Place and date _____ The undersigned _____

“ANNEX B1”
List of teachings ***

N°	Acc. Year	Teaching	SSD	ECTS	University	Faculty/Course **	Modality
1						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
2						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
3						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
4						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
5						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
6						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
7						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
8						Fac. _____ Corso _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
9						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
10						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
11						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality
12						Fac. _____ Co. _____	<input type="checkbox"/> In the classroom <input type="checkbox"/> Telematic* <input type="checkbox"/> Other modality

* By *telematic* we mean teaching that does not include any compulsory in-class or laboratory teaching activity; courses that include a part of telematic activities and a part of in-class or telematic activities are to be indicated under the heading "other method".

** In addition to the faculty, also indicate the degree course, the master's degree, the specialization or doctoral course to which the teaching pertained.

*** If the available lines are not sufficient, use this sheet several times by placing a progressive numbering in the field at the bottom of the document; it is not necessary to affix a number if only one sheet has been completed.

For activities carried out abroad, it is necessary to attach a suitable copy documentation

“ANNEX B2”
List of training activities and research carried out *

N°	YEAR	Activity	Institution
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

*If the available lines are not sufficient, use this sheet several times by placing a progressive numbering in the field at the bottom of the document; it is not necessary to affix a number if only one sheet has been completed.

For activities carried out abroad, it is necessary to attach a suitable copy documentation

“ANNEX B3”
Participation in national and international research groups *

N°	Year	Research group	National - International	Institution	Role
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

* If the available lines are not sufficient, use this sheet several times by placing a progressive numbering in the field at the bottom of the document; it is not necessary to affix a number if only one sheet has been completed.

For activities carried out abroad, it is necessary to attach a suitable copy documentation

“ANNEX B4”
Speaker at national and international conferences and conventions *

N°	Year	Place	Event title	Report title	National / International	Institution
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

*If the available lines are not sufficient, use this sheet several times by placing a progressive numbering in the field at the bottom of the document; it is not necessary to affix a number if only one sheet has been completed.

For activities carried out abroad, it is necessary to attach a suitable copy documentation

“ANNEX B5”
Language skills *

N o	Language	CEFR	Yes / no certification	Graduation date and certification body (only if "yes" is indicated)
1				
2				
3				
4				
5				

* If the available lines are not sufficient, use this sheet several times by placing a progressive numbering in the field at the bottom of the document; it is not necessary to affix a number if only one sheet has been completed.

For activities carried out abroad, it is necessary to attach a suitable copy documentation

Annex B5: Language skills	
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“ANNEX B6”
Additional documents that are attached in PDF format *

N°	Description	N° sheet
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		

Use this form to indicate all the documents that you intend to attach other than the attached publications (for example, documents relating to any activities carried out abroad or letters certifying the declaration that a publication is being printed).

* If the available lines are not sufficient, use this sheet several times by placing a progressive numbering in the field at the bottom of the document; it is not necessary to affix a number if only one sheet has been completed.