



UNIVERSITÀ DEGLI STUDI DI TORINO

Direzione Ricerca e Terza Missione
Sezione Dottorati di Ricerca

FORM A

To the Rector
Of the University of Turin

I, the Undersigned,

NAME _____ SURNAME _____

PLACE OF BIRTH (*town and Country*) _____

DATE OF BIRTH _____

ITALIAN TAX CODE (*codice fiscale*)

PERMANENT HOME COUNTRY ADDRESS (*RESIDENCE*) (*street name, number, town*)

FULL POSTAL CODE _____

COUNTRY _____

TEL. NUMBER _____ MOBILE _____

E-MAIL _____

I was admitted to the PHD Programme 34th cycle in:

PhD School in:

I APPLY TO

Enrol in the first year of the above-mentioned PhD Programme and I agree to attend the course full-time as established by the Doctoral Board of the PhD Programme.

For this purpose, fully understanding that I am subject to the penalties provided for making false or misleading declarations under art. 75 and 76 of the Italian Law 445/2000,

I HEREBY DECLARE THAT

I AM A CITIZEN OF THE FOLLOWING COUNTRY:

I HOLD A UNIVERSITY DEGREE IN (*specify name of Master's degree only*):

DATE OF THE AWARD (*dd/mm/yyyy*):

AWARDING INSTITUTION (*specify name of the University*):

FINAL GRADE:

- (only for students with scholarship) I WAS NOT AWARDED A SCHOLARSHIPS FOR PAST PHD PROGRAMMES IN ITALY

I ALSO HEREBY CERTIFY THAT
(*Cross the appropriate statement*)

- I AM NOT ENROLLED, at the date of 1st October 2017,8IN ANY OTHER PHD PROGRAMME, UNDERGRADUATE OR POSTGRADUATE DEGREE COURSE, ITALIAN SPECIALISATION MASTER OR ANY OTHER KIND OF SPECIALIZATION COURSES (including specialization courses organized by private Institutes – as art. 17, section 96, Italian Law 127/97).
- I DO NOT EXPECT TO RECEIVE ANY OTHER SCHOLARSHIP OUTSIDE THE PHD SCHOLARSHIP (Only for students with scholarship) at the date of 1st October 2018.
- I AM ENROLLED IN THE FOLLOWING MEDICAL SPECIALITY TRAINING COURSE:
_____ from the date _____
of _____
- AND TO HOLD A CONTRACT IN SPECIALITY TRAINING in accordance with Italian law n. 368 dated 17th August 1999 (PhD scholarships are incompatible with any contract in speciality training as set by the Italian Law n. 368 17th August 1999).

FINALLY, I HEREBY CERTIFY THAT
(*cross the appropriate statement*)

- I WAS NOT AWARDED A RESEARCH FELLOWSHIP (Assegno di ricerca)

OR

- I WAS AWARDED A RESEARCH FELLOWSHIP (Assegno di Ricerca) by (*specify institution*)

For the following period (*start/end date*) _____

AND

- I DID NOT OBTAINED ANOTHER PHD DEGREE

OR

- I OBTAINED/ I WILL OBTAIN A PHD DEGREE IN (*name of the specialisation*)

AT THE UNIVERSITY OF

TURIN, _____

(SIGNATURE - compulsory)¹

Pursuant to art. 13 of Italian Law n. 196/2003, candidates are hereby informed that their personal data will be collected and processed in an automated database by the University of Turin to used in the organisation of PhD programmes. The data provided by candidates will also be used in the performance of the University's institutional functions as established by current law and regulations and in observance of the principles of transparency, correctness, confidentiality and necessity. The collected data may be shared with other public and private subjects as established by the above-mentioned Italian Law and the Regulation for implementing the "Code on personal data protection " of the University of Turin. Candidates must supply the required data in order to be enrolled in the PhD Programme. If the data is not supplied, the candidate will be excluded from the PhD Programme. Candidates have the right to enforce against the Rector of the University of Turin, who is the Data Controller, the rights established by art. 7 of Italian Law n.196/2003. The Director of the Department of Research is the data processor.

¹ Extract from art. N. 38 Italian Law 445/2000: "Declarations made in place of notarial certificates.... are signed by the person making the declaration in the presence of the employee or are signed and presented together a copy of an identification document by the person making the declaration".