



# 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 36<sup>th</sup> cycle 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:

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

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

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

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FINAL GRADE:

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- (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*)

- AM NOT ENROLLED, at the date of 1<sup>st</sup> October 2020 IN 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 1<sup>st</sup> October 2020.
- 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 17<sup>th</sup> August 1999 (PhD scholarships are incompatible with any contract in speciality training as set by the Italian Law n. 368 17<sup>th</sup> 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*)<sup>1</sup>

\_\_\_\_\_

*According to the art. 13 of the EU Regulation n. 679 of 2016 regarding the protection of personal data and according to the implementation of Legislative Decree 101 of 2018, the personal data provided by the candidates will be treated, pursuant to the aforementioned regulation, for the execution of a task of public interest or connected to the exercise of public authority and, in particular, for the institutional purposes of teaching and research by the University of Turin.*

*The pro tempore Head of Personal Data Protection (DPO) or Data Protection Officer of the University of Studies of Turin (DPO) is prof. Sergio Foà (rpd@unito.it)*

*The complete information regarding the data processing method is available at: <https://www.unito.it/informative-sul-trattamento-dei-dati-personali>*

<sup>1</sup> 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".