

ANNEX 6

**SELF- DECLARATION IN LIEU OF ATTESTED AFFIDAVIT
(ART. 19, 47 and 47 OF D.P.R. n. 445 of 28th December 2000**

I, the undersigned

SURNAME		
NAME		
SEX		M <input type="checkbox"/> F <input type="checkbox"/>
PLACE OF BIRTH	CITY	
	PROVINCE (if in Italy)	
	COUNTRY (if other than Italy)	
DATE OF BIRTH (dd/mm/yyyy)		
CITIZENSHIP		
RESIDENCE	CITY	
	PROVINCE (if in Italy)	
	COUNTRY (if other than Italy)	
	Street and Number	
	ZIP CODE	
ADDRESS FOR THE PURPOSES OF THIS APPLICATION	CITY	
	PROVINCE (if in Italy)	
	Street and Number	
	ZIP CODE	
CONTACT TELEPHONE NUMBER (including International Area code)		
E-MAIL ADDRESS		
QUALIFICATIONS (Specify Graduate Degree)		

In connection with the application to the public call based on scientific and academic records for admission to the Phd programme in _____
Curriculum _____
XXXII cycle, aware of penalty in case of misrepresentation or false statements in a public document as in art. 76 D.P.R. (Decree of the President of the Italian Republic) n. 445 of 28th December 2000;

I DECLARE

That the copies of document translations and publications herein listed and enclosed to the present declaration, are true copies of the originals:

Date: _____

Signature: _____
(full and legible signature)

N.B. The signature has to be accompanied by a photocopy of a valid identity document.