



**ATTACHMENT G**

**SUBSTITUTE DECLARATION OF CERTIFICATION OF CONFORMITY TO THE ORIGINAL COPY**

(Art. 19, 46 and 47 of D.P.R. 28.12.2000, No. 445)

I, the undersigned

SURNAME		
NAME		Male/Female <input type="checkbox"/> <input type="checkbox"/>
PLACE OF BIRTH	CITY	
	PROVINCE	
	COUNTRY	
- 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	
	(Street and number)	
	ZIP CODE	
TELEPHONE NUMBER (INCLUDING INTERNATIONAL AREA CODE)		
E-MAIL		
SKYPE		
QUALIFICATIONS ( <i>Specify Graduate Degree</i> )		

In relationship with the application to the public Call based on scientific and academic records for admission to the doctoral programme in \_\_\_\_\_ Curriculum \_\_\_\_\_ profile \_\_\_\_\_ (if \_\_\_\_\_ applicable) - XXXII cycle, aware of \_\_\_\_\_



**PON** Ricerca e  
2014- 2020 **Innovazione**



Ministero dell'Istruzione, dell'Università e della Ricerca

penalty in case of misrepresentation or falsity in a public document as in Art.76 of DPR 28.12.2000, No. 445;

**DECLARE**

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

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Date \_\_\_\_\_

\_\_\_\_\_  
Signature

N.B.: The signature must be accompanied by a photocopy of a valid identity document.