

## ATTACHMENT G)

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

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

I, the undersigned

SURNAME			
NAME		M/F	
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		
INTERNATIONAL AREA CODE)			
E-MAIL			
SKYPE			
QUALIFICATIONS (Specify Graduate Degree)			

Referring to the application to the public Call based on scientific and academic records for admission to the doctoral programme in

Curriculum profile (if applicable) \_\_\_\_\_ - XXXVI

cycle, aware of 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:

---

---

---

---

---

Date \_\_\_\_\_

Signature

---

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