## Annex A

**Dichiarazione sostitutiva di atto notorio**

Self drafted affidavit (art. 47 del DPR n° 445/2000)  
(art. 47 Presidential Decree n. 445/2000)

Il sottoscritto/the undersigned

cognome/surname\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_nome/name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

nato a/born in\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ il/on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

consapevole delle sanzioni penali richiamate dall’articolo 76 del Dpr 445/2000 in caso di dichiarazioni non veritiere e falsità in atti  
aware that providing false data and using fake documents are crimes punishable by law (art. 75 and 76 of the Presidential Decree no. 445/2000)

**dichiara sotto la propria personale responsabilità  
declares under his/her own responsibility**

che le pubblicazioni/ i titoli sotto elencati, prodotti in copia tramite upload, sono conformi all’originale.

that the publications and the qualifications listed below, produced as copies, comply with the originals.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Milano, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Data/date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Firma/Signature

Ai sensi dell’art. 3 del DPR 445/2000 l’autocertificazione può essere utilizzata solo dai cittadini appartenenti all’Unione europea. I cittadini non europei devono produrre documenti originali o in copia autenticata secondo la normativa vigente.

According to the art. 3 of the Presidential Decree no. 445/2000, only Eu citizens are entitled to use this form. Non Eu citizens must submit the original documentation or photocopies authenticated in compliance with the law in force.

## Form 1

PROGETTO DI RICERCA / PROJECT

|  |  |
| --- | --- |
| **Cognome e nome del candidato**  **Applicant’s Name** |  |
| **Corso di dottorato**  **PhD** |  |

**1) Titolo del progetto / Project title**

**2) Sommario / Abstract**

**3) Obiettivi e rilevanza dei risultati ottenibili nel contesto dello stato dell’arte / Project aims and their relevance in the context of the state of the art**

**4) Descrizione del progetto / Project description**

**5) Bibliografia / References**

Il progetto dovrà avere almeno 2.000 e non più di 4.000 parole, bibliografia esclusa. The project should have at least 2,000 and not more than 4,000 words, excluding references.

## Form 2 (Italian version)

**LETTERA DI REFERENZA**

|  |  |  |  |
| --- | --- | --- | --- |
| **Cognome e nome del candidato** |  | **Corso di dottorato** |  |

**Da compilare in tutte le parti**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Cognome e nome del referente** |  | **Ruolo** |  | |
| **Università/Ente** |  |  |  | |
| **Indirizzo** |  | **Città** |  | |
| **CAP** |  | **Paese** |  | |
| **Telefono** |  | **Email** |  | |
| **Data** |  |  |  |

**Come valuta la qualità del candidato rispetto ad altri studenti di pari livello formativo** (studenti di un corso, laureandi, ecc...)?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Sotto lamedia(50%)** | **Top 50%** | **Top 25%** | **Top 10%** | **Top 5%** | **Top 2%** |
|  |  |  |  |  |  |

**Come valuta l'attitudine del candidato alla attività di ricerca?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Inabilitato arispondere** | **Sotto la media** | **Media** | **Buona** | **Ottima** | **Eccezionale** |
|  |  |  |  |  |  |

**Commento (Giudizio personale sul candidato)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Form 2 (English version)

**REFEREE FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant’s Name** |  | **PhD** |  |

To be completed in all areas

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Referee’s name** |  | **Position/Title** |  | |
| **Institution/Company** |  |  |  | |
| **Address** |  | **City** |  | |
| **Zip code** |  | **Country** |  | |
| **Phone contact** |  | **Email** |  | |
| **Date** |  |  |  |

**On the following scale, please rank the applicant against other students in comparable fields and indicate the comparison group used.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Bottom 50%** | **Top 50%** | **Top 25%** | **Top 10%** | **Top 5%** | **Top 2%** |
|  |  |  |  |  |  |

**Please rate this applicant in overall promise for the doctorate (check one)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unable to evaluate** | **Below Average** | **Average** | **Good** | **Outstanding** | **Exceptional** |
|  |  |  |  |  |  |

**Give your comments here  
(Your personal evaluation about the candidate)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## 

## Form 3

**RICHIESTA COLLOQUIO TELEMATICO - ONLINE INTERVIEW**

**DA COMPILARSI SOLO SE IL COLLOQUIO PER L’AMMISSIONE È PREVISTO IN PRESENZA DAL BANDO E IL CANDIDATO È IMPOSSIBILITATO A PRESENTARSI**

**THIS FORM MUST BE FILLED ONLY BY APPLICANTS WHO ARE UNABLE TO SIT THE INTERVIEW ON THE UNIVERSITY PREMISES AS REQUIRED BY THE PHD ADMISSION CALL**

IL/LA SOTTOSCRITTO/A - THE UNDERSIGNED (COGNOME/SURNAME)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(NOME/NAME) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PASSAPORTO O CARTA D’IDENTITÁ/PASSPORT OR IDENTIY CARD n°\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RICHIEDE DI SOSTENERE L’ESAME DI AMMISSIONE AL DOTTORATO IN MODALITÁ TELEMATICA/

REQUESTS TO TAKE THE PHD ADMISSION EXAM REMOTELY

PER I SEGUENTI MOTIVI /FOR THE FOLLOWING REASONS:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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DATA/DATE FIRMA DEL RICHEDENTE /

SIGNATURE OF THE APPLICANT