

SCHOLARSHIP APPLICATION

**TO THE RECTOR
UNIVERSITY OF SIENA**

I, the undersigned (name and surname), _____

born in _____ on _____

resident in _____

_____ Zip/Post Code _____

Italian Fiscal Code (if any) _____ tel. _____ mobile _____

e-mail _____ skype n. _____

REQUEST

to take part in the competition for no. _____ scholarship(s)/prize(s) of the value of € _____

reserved for _____ to carry out research activities on the following topic: _____

at _____ Scientific coordinator: Prof. _____

as indicated in the call issued with Rector's Decree/Provision of Head of Administration index no. _____ Ref. no. _____ of

DECLARE

(under Presidential Decree no. 445 of 28 December 2000, as subsequently amended)

- I elect the following domicile in Italy to which any notices concerning the selection procedure should be sent:

Address _____

Zip/Post Code _____ Tel. _____

- I am a _____ citizen;

- I am registered at (please specify) _____ in _____ (as requested in art. 1 of the call) at the University _____;

- I am / I am not** in possession of any other scholarships (of the same type or not) (if applicable please specify the type of scholarship and the period covered) _____;

- I am / I am not** in possession of a yearly income for the period covered by the scholarship of more than € 7,746.85= (if applicable, please specify the amount) _____;

- I am a disabled person and require the following aids/assistance, if called for an interview _____

"Disabled person" means a disabled individual who is recognized as such following confirmation by local health authorities through medical commissions as described in Law 104/1992, or by the relevant legislation of his/her home country.

I, the undersigned, am aware that false representations are punishable under art. 76 of the Italian Criminal Code and specific laws on the subject.

I undertake to give prompt notice of any change in the address provided above.

I enclose with this form:

a) (list pass exams whit average) _____

b) _____

c) _____

d) _____

I give my consent for my personal data to be processed for the purposes of this procedure, in compliance with Legislative Decree 196/2003.

Place and date _____

THE DECLARANT
