**ANNEX 1**

**APPLICATION FORM**

To the attention of the Director of INAF-Osservatorio Astrofisico di Arcetri

I, THE UNDERSIGNED,

(Name(s)) …………………………………. (Surname)……………………………………………………………………………

Place of birth (Town/State/Country) ……………………………………………………………………………………………...

Date of birth (dd/mm/yy) ……………………………………………………………………………………………………………...

Nationality ……………………………………………………………………………………………………………………………………...

Permanent residence address (House number/Street/Town/Post Code/Country):

…………………………………………………………………………………………………………………………………………………………

Italian Tax Identification Number (Codice Fiscale), if available, otherwise leave blank …………………………………………………………………………………………………….

Email address: ………………………………………………………………………………………………………………………………...

agree to the processing of my personal data, in accordance with Italian Leg. Decree n. 196/2003, for the purposes of the present selection procedure,

having read the Call for Applications **D.D. n. 22/2021**  for the appointment of one research fellowship.

REQUEST

to apply for the above-mentioned fellowship, and to this end, aware that false declarations are punishable by law and that this Administration will carry out random checks on the accuracy of the declarations made by candidates,

DECLARE

under my own responsibility,

1. that I hold the following degrees

* Research Doctorate (PhD) …………………………………… ………………………………………awarded by ……………………………………………….………………………… on date …………………………………..Title of thesis ……………………………...…………………………………………………………………………………………

……………………………………………………………………………………………………………………………………….

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* Master Degree……………… …………………………………… ………………………………………awarded by ……………………………………………….………………………… on date …………………………………..Title of thesis ……………………………...…………………………………………………………………………………………

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1. that I hold the following educational qualifications………………………………………………………... ……………………………………………………………………………………………………………………………………….,

awarded by…………………………..……………………………………………………, Date………………………….;

1. that I am aware of the restrictions described in Article 5, of the Call for Applications for this research fellowship;
2. that I am aware that, under art. 22 Italian Law 240/2010, the research fellowship:

* cannot be held in conjunction with attendance of academic courses which formally give access to a doctorate, and attendance of PhD courses with fellowship;
* cannot be held in conjunction with other fellowships of whatever kind, except those awarded with the aim of integrating the training or research activity of the fellow through a period of research abroad;
* does not permit aggregation of income from other working activities, also part-time, carried out continuously.

1. that I have never received a research award as per art. 22, Italian Law 240/2010;

or

that I have previously received a research awards as per art. 22, Italian Law 240/2010 and, in particular I have been the recipient of : (1)

* a research fellowship entitled ……….....................................................………………………,

at (name of the institution)………...........................................……………………………………….,

beginning……......………ending…….....……….total months ………………..

* a research fellowship entitled …………..................................................………………………,

at (name of the institution)………….................................................……………………………….,

beginning………....……ending………......……total months ……………..

* a research fellowship entitled …............................................………………..…………………,

at (name of the institution)…….................................................…………………………………….,

beginning………....……ending………......……total months ……………..

1. that I wish to receive any communication relating to the selection at the following address and that I will give due notice of any change of address:

Address (House number/Street/Town/Post Code/Country): ……………………………………………..........……………………………………………………………………………………………………………………………………………………………………………………………………………………………………..

PEC or Email address: ………………………………………………………………………………………………………..

List of the documents attached to this form:

* Annex 2, **signed and dated** by the applicant;
* copy of a valid identity document (ID card for EU – citizens or passport for non- EU – citizens);
* curriculum vitae, **signed and dated** by the applicant providing evidence of possession of the requirements and skills required to carry out the research, including a list, if applicable, of grants and fellowships held in the past;
* research statement;
* list of publications

1. Indicate the number of months for which the award was used and the name of the institution granting the award. Please provide details of each award, for example, if you have had two awards of 24 months each at the same institution indicate these as two separate awards on two different lines

Date Signature

**ANNEX 2**

**Certification and Self-Declaration in lieu of affidavit**

**(Art. 19 - 46-47 the DPR 28th December 2000, n. 445)**

**DICHIARAZIONE SOSTITUTIVA DI CERTIFICAZIONE**

**DICHIARAZIONE SOSTITUTIVA DI ATTO DI NOTORETÀ**

**(Art. 19 – 46 – 47 del D.P.R. 28 Dicembre 2000, n. 445)**

I, THE UNDERSIGNED,

(Forename(s))…………………………… Surname)………………………………………

Place of birth (City/State/Country) ……………………………….

Date of birth (dd/mm/yy) …………………………..

Nationality ……………………………

Gender ………………

Permanent residence address (number/street/town/postal code/Country:

……………………………………………………………………………………………

Email address: ……………………..

aware that false declarations are punishable by law and that this Administration will carry out random checks on the accuracy of the declarations made by candidates

DECLARE UNDER MY OWN RESPONSIBILITY

- THAT THE CONTENT OF THE ATTACHED “CURRICULUM VITAE” IS TRUE

- THAT THE DOCUMENTATION PRODUCED IN COPY: OF THE ORIGINAL

- ……………………

- ………………….

Date Signature

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

*\* the photocopy of a valid identity document of the signer must be attached*