



To the Rector of the University of Milano - Bicocca

The undersigned:

.....
Last Name

.....
First name

born in on / /

**For the purpose of enrolling in the Research Doctorate (PhD) course in:
(please specify the full name of the course)**

.....
**STATEMENTS IN LIEU OF CERTIFICATION
(Art. 46 – Presidential Decree 445 of 28 December 2000)**

being aware of the criminal penalties that may be incurred as a result of making false statements, of drafting or using false documents, as referred to in art. 76 of Presidential Decree 445 of 28/12/2000.

hereby declares:

statements in lieu of certification (art. 46 Presidential Decree 445 of 28 December 2000)

that he/she is not enrolled in any other Course of Studies

that he/she is enrolled in the Course of Studies in

at the University of

which he/she has already suspended (*in which case please attach a copy of the suspension receipt or certificate*)

that he/she will suspend for the entire period of the Course

▪ that he/she is aware that no additional applications for registration at this university office or other university offices may be submitted, and that any registration at another university or other course of studies shall result in cancellation of the academic results achieved

that he/she does not perform any work activity:

that he/she is performing the following work activities:

Public employee Employee in the private sector

at

at

as

as

on leave from until

indefinite term contract fixed term contract Part - time on a

% basis

that he/she is engaged in a full-time job that he/she is not engaged in a full-time job

Freelance professional (please specify your professional activity and weekly time commitment)

.....
 That he/she is the beneficiary of research grants from the University

of Department.....

Milan,

.....
(Signature)

Section for scholarship beneficiaries only

The undersigned

further states that

- in 2016 his/her total annual gross personal income does not exceed €15,000;
- he/she shall notify the administrative office of the University of any increase in his/her income that would cause his/her annual gross income to exceed the limit of €15,000;
- he/she is aware that the amount allocated to the insurance coverage shall be deducted from the scholarship;
- he/she has not been granted any other scholarship for the same reason;
- he/she is aware that the doctorate scholarship cannot be combined with other scholarships, regardless of the reasons for which they are granted, except those awarded by national or foreign institutions to supplement the training or research activity through periods of stay abroad;
- he/she acknowledges that working as an employee or freelancer is not permitted if it affects his/her participation in doctorate activities and the quality and independence of his/her scientific activity;
- he/she has to give up the scholarship:
 - for the entire period of the course of study
 - for the academic year 2015/2016

for the following reason:

.....
.....

Other statements

Milan,

.....
.....
.....
(Signature)

Incomplete forms will not be accepted

Note: personal data are collected and processed in compliance with the law, with the principles of fairness and protection of confidentiality, only for purposes related to performing institutional activities, and specifically for all obligations that need to be fulfilled to ensure the teaching and administrative relationship with the University is fully effective (Legislative Decree no. 196 of 30 June 2003 as amended).