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| **CURRICULUM VITAE**  **Candidates who will not upload their CV and cover letter filling out this template will be excluded from the call for applications.**  **The Admission Board can refuse to accept a candidate’s application in case of false declarations.**  **SECTION A: PERSONAL INFORMATION**   |  |  | | --- | --- | | Last Name: |  | | First Name: |  | | Birth date: |  | | Birth place: |  | | Country of citizenship: |  | | Country of residence: |  |   **SECTION B: ACADEMIC DEGREES**  *Add separate entries for each academic degree (Ba’s, Ma’s, MSc, PhD)*  **BACHELOR’S**   |  |  | | --- | --- | | University: |  | | Bachelor’s degree in: |  | | Language of instruction: |  | | From (YY, MM): |  | | To (YY, MM) or expected to (YY, MM): |  | | Standard duration of the program (in years): |  |   **MASTER’S**   |  |  | | --- | --- | | University: |  | | Master’s degree in: |  | | Language of instruction: |  | | From (YY, MM): |  | | To (YY, MM) or expected to (YY, MM): |  | | Standard duration of the program (in years): |  |   **PHD/DOCTORAL DEGREE**   |  |  | | --- | --- | | University: |  | | PhD/Doctoral Degree in: |  | | Language of instruction: |  | | From (YY, MM): |  | | To (YY, MM) or expected to (YY, MM): |  | | Standard duration of the program (in years): |  | | Title of thesis (if available): |  |   **SECTION C: ENGLISH LEVEL**  **B2 LEVEL CERTIFICATE**  *Please tick the box that describes your situation and provide all the related information*   |  |  |  | | --- | --- | --- | | * I have already earned a B2 level certificate   *(please note that only the certifications reported at page 10 of the admission notice are accepted)* | |  | |  | Type of certificate: *e.g. IELTS 5* | | | Certification date (YY, MM): | | | * I will earn a B2 level certificate by 31 July 2021   *(please note that only the certifications reported at page 10 of the admission notice are accepted)* | |  | |  | Expected type of certificate: *e.g. IELTS 5* | | | Expected date of certification (YY, MM): | | | * I am a native English speaker | | | | * I attended the upper secondary school in English | | | | * I attended a Bachelor’s degree program or a Master’s degree program or a PhD/Doctoral program in English | | |   **SECTION D: EDUCATIONAL, RESEARCH AND WORK EXPERIENCES**  **EDUCATION AND TRAINING ABROAD**  *All the periods spent at foreign universities (e.g., within ERASMUS program or other study/research programs) and further educational experiences abroad (e.g., internship, research experience in the field of neuropsychology or cognitive neuroscience) will be positively evaluated.*  *Please note that the Admission Board* ***will not take into account*** *periods spent abroad with the sole purpose of learning a foreign language or working in a field not consistent with neuropsychology or cognitive neuroscience (e.g., au pair period) neither residence for study previous to the university career.*  *Add separate entries for each educational experience abroad starting from the most recent*   |  |  | | --- | --- | | Type of experience: | *e.g. Erasmus* | | Hosting institution: |  | | Country: |  | | Period (from YY, MM to YY, MM): |  | | Brief description of the activities: |  | | Name and email of the supervisor of the activities carried out (if any): |  |   **SCHOLARSHIPS AND AWARDS**  *All the academic and non-academic distinctions that could put in evidence your aptitude to enrol in the Master’s degree programme.*  *Add separate entries for each award and scholarship starting from the most recent*   |  |  | | --- | --- | | Scholarship/Award title: |  | | Institution providing the Scholarship/Award: |  | | Country: |  | | Date (YY): |  | | Brief description of the Scholarship/Award motivation: |  |   **COURSES, SEMINARS, CONFERENCES AND SUMMER SCHOOLS**  *List your participation in courses, seminars, conferences, summer schools not included in your study program.*  *Add separate entries for each course, seminar, conference, summer school starting from the most recent*   |  |  | | --- | --- | | Course/Seminar/Conference/Summer school title: |  | | Institution providing the Course/Seminar/Conference/Summer school: |  | | Period (from YY, MM, DD to YY, MM, DD): |  | | Brief description of the Course/Seminar/Conference/Summer school contents: |  |   **INTERNSHIPS, RESEARCH AND WORK EXPERIENCES**  *Please list relevant professional activities (if any). The selection committee will evaluate only work experiences, traineeships, volunteer work or research experiences in the field of neuropsychology and cognitive neuroscience. In addition, the Board will consider extracurricular internships and research experiences not included in the activities foreseen by the candidate’s degree program. Non-relevant work experiences (e.g., baby-sitting, student representation, disabled and elderly care, etc.) will not be evaluated.*  *List here any internship/work experience/research experience.*  *Add separate entries for each activity starting from the most recent*   |  |  | | --- | --- | | Type of experience: | *e.g. research collaboration* | | Hosting institution: |  | | Country: |  | | Period (from YY, MM to YY, MM): |  | | Brief description of the activities: |  | | Name and email of the supervisor of the activities carried out (if any): |  |   **SCIENTIFIC PUBLICATIONS AND TALKS**  *Only peer-reviewed publications will be evaluated. Presentations, essays or talks belonging to the activities foreseen by the candidate’s study program will not be considered*   |  |  | | --- | --- | | Number of papers published in peer-reviewed journals with Impact Factor: |  | | Number of papers published in peer-reviewed journals without Impact Factor: |  | | Number of papers published in peer-reviewed conference proceedings: |  | | Number of abstracts published in peer-reviewed conference proceedings: |  | | Number of documents submitted or under review: |  |   *For each of them please provide: author/s name, title of the publication, date of publication, journal title, volume number, page/s number, DOI or ISSN number (if available, otherwise if the work has been accepted but not published yet or under review, please attach the acceptance letter or the submission confirmation)*   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Author/s | Title | Year | Journal | Volume | Page/s | DOI/ISSN no. | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | | --- | --- | | Number of talks held in international conferences: |  | | Number of talks held in national conferences: |  |   *For each of them please provide: author/s name, title of the talk, conference title, year, conference URL (if available)*   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Author/s | Title | Year | Conference title | Conference URL | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  |   **OTHER SKILLS**  List any relevant skill not already mentioned (e.g. scientific software applications, programming languages, neuroscientific techniques, statistics, etc.). Specify in what context they were acquired. *The Admission Board will evaluate only skills you could prove by means of a certification*   |  | | --- | | 1. | | 2. | | 3. |   **PLEASE, INDICATE HERE WHAT WOULD LIKE TO BE AFTER THE MASTER’S DEGREE (ONLY ONE CHOICE IS ALLOWED):**   * CLINICAL PSYCHOLOGIST (evaluation and treatment of psychiatric disorders) * PSYCHOTHERAPIST * DEVELOPMENTAL PSYCHOLOGIST (mental retardation, autism, learning disorders, etc.) * NEUROPSYCHOLOGIST (evaluation and treatment of acquired neuropsychological disorders) * RESEARCHER IN COGNITIVE NEUROSCIENCE * OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **PLEASE, EXPRESS YOUR PREFERENCE FOR THE FOLLOWING COURSES:**  CLINICAL NEUROPSYCHOLOGY Dislike extremely Dislike Neither Like nor Dislike Like Like extremely  ○ ○ ○ ○ ○  PSYCHIATRY AND Dislike extremely Dislike Neither Like nor Dislike Like Like extremely  PSYCHOPHARMACOLOGY ○ ○ ○ ○ ○    NEUROPSYCHOLOGICAL Dislike extremely Dislike Neither Like nor Dislike Like Like extremely  ASSESSMENT AND ○ ○ ○ ○ ○  REHABILITATION  NEW TRENDS IN Dislike extremely Dislike Neither Like nor Dislike Like Like extremely  NEUROSCIENCE ○ ○ ○ ○ ○  COGNITIION Dislike extremely Dislike Neither Like nor Dislike Like Like extremely  AND COMPUTATION ○ ○ ○ ○ ○  NEW CONCEPT IN Dislike extremely Dislike Neither Like nor Dislike Like Like extremely  COGNITIVE PSYCHOLOGY ○ ○ ○ ○ ○  *The candidate, aware of the penal consequences of making untruthful declarations or producing or using false deeds under Art. 76 of Italian Presidential Decree no. 445 dated 28/12/2000, and the additional sanctions under art. 75 and 76 of the above mentioned Presidential Decree no. 445 dated 28/12/2000, consisting of forfeiture of any benefits resulting from provisions based on untruthful declarations,*  *HEREBY DECLARES THAT*   * *He/she knows and accepts all the rules stated in the Call for admission* * *the above information is true* * *He/she complies with all the requirements of the Call for admission* * *He/she has been informed, pursuant to and in accordance with European Union Regulation no.2016/679 and Legislative Decree no. 101/2018, that personal information will be used, also through computer processing, exclusively for the purposes of the procedure for which this declaration is presented.*   Signature and Date  ………………………………….  **NOTE:** PRINT, SIGN AND UPLOAD THE COMPLETED FORM AS A PDF FILE |