

Università degli Studi di Padova

## Allegato 1 - A.Y. 2025/26

# APPLIED CHILD AND ADOLESCENT PSYCHOLOGY

## **Evaluation Form**

This form includes dynamic fields; please fill out them <u>directly on your computer</u>. FORMS FILLED OUT BY HANDWRITING WILL BE NOT EVALUATED

## **PERSONAL INFORMATION**

st/family name:	
st name:	
th date (DD/MM/YYY):	_
th place:	
untry of citizenship:	
untry of residence:	

## **ACADEMIC DEGREES**

First, enter details of your Bachelor's degree in Psychology. If you have more than one Bachelor's degree, you can add others in the field OTHER DEGREES below.

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):
Number of exams sat successfully at the moment of the application (out of total exams)

#### ANY OTHER ACADEMIC TITLE (up to 2):

Type of degree:
University:
Degree in:
Language of Instruction:
Degree already obtained:YESNO
Standard duration of the programme (in years):
Title of the thesis (if available):
Type of degree:
University:
Degree in:
Language of Instruction:
Degree already obtained:YESNO
Standard duration of the programme (in years):

Title of the thesis (if available):

## UNIVERSITA' DEGLI STUDI DI PADOVA SCUOLA DI PSICOLOGIA

## **BACHELOR'S DEGREE COURSES AND MARKS**

Please, list here <u>the titles of the attended courses</u> related to the following psychological areas: Developmental and educational psychology, Psychometrics and Social psychology, with their <u>mark</u>:

Developmental and educational psychology 1.

Developmental and educational psychology 2.

Psychometrics 1.

Psychometrics 2.

Social psychology 1.

Social psychology 2.

#### **INTERNSHIPS**

Please list relevant internships (if any). Add separate entries (up to 4) for each activity, starting from the most recent.

Internship 1			
Was it part of your degree programme:	O YES	O NO	
Type of internship:			
Name and ECTS in case it is listed in the transcript of records:			
Was it a voluntary internship?	Ó YES	O NO	
Hosting institution:			
The activity was in the country of residence o	r abroad?	O Country of residence	O Abroad
Period (YY, <i>MM-MM</i> ): fo	r a total of	hours	
Name, role and contact (e-mail preferably) of the supervisor:			
Brief description of the activities:	•		
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Internship 2			
Was it part of your degree programme:	O YES	O NO	
Type of internship:			
Name and ECTS in case it is listed in the transcript of records:			
Was it a voluntary internship?	O YES	O NO	
Hosting institution:			
The activity was in the country of residence or	abroad?	O Country of residence	O Abroad
Period ( <i>YY, MM-MM</i> ): for	a total of	hours	
Name, role and contact (e-mail preferably) of the supervisor:			
Brief description of the activities:	-		
Was it a voluntary internship? Hosting institution: The activity was in the country of residence or Period ( <i>YY</i> , <i>MM-MM</i> ): for Name, role and contact (e-mail preferably) of the second	O YES abroad? a total of	O NO O Country of residence hours	O Abroad

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Internship 3			
Was it part of your degree programme:	O YES	O NO	
Type of internship:			
Name and ECTS in case it is listed in the transcript of records:			
Was it a voluntary internship?	O YES	O NO	
Hosting institution:			
The activity was in the country of residence o	r abroad?	O Country of residence	O Abroad
Period (YY, <i>MM-MM</i> ): fo	r a total of	hours	
Name, role and contact (e-mail preferably) of the supervisor:			
Brief description of the activities:	•		

Internship 4			
Was it part of your degree programme:	O YES	O NO	
Type of internship:			
Name and ECTS in case it is listed in the transcript of records:			
Was it a voluntary internship?	Ó YES	O NO	
Hosting institution:			
The activity was in the country of residen	ce or abroad?	O Country of residence	O Abroad
Period (YY, MM-MM):	for a total of	hours	
Name, role and contact (e-mail preferably) of the supervisor:			
Brief description of the activities:	, .		
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#### **MOBILITY EXPERIENCES**

Please, list mobility experiences you had during your bachelor's degree, starting from the most recent.

#### Mobility 1

#### Mobility 2

Type of activity (study, research, internship,...):\_\_\_\_\_ Was the mobility self-funded or did you receive a scholarship?\_\_ Hosting institution:\_\_\_\_\_ Period (YY,MM-MM): \_\_\_\_\_ Brief description of the activities:

## **TERMS & CONDITIONS AGREEMENT AND SIGNATURE**

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The candidate, aware of the legal consequences of making untruthful declarations or producing or using false deeds under Art. 76 of the 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-reported 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 the 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

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Please sign and upload the completed form as a pdf file. FORM IN A FORMAT DIFFERENT FROM PDF (E.G., WORD) OR NOT SIGNED WILL BE NOT EVALUATED.