

To the Department of Physics and Astronomy "Galileo Galilei"
University of Padua

The undersigned
(Surname) (Name)

Place of birth - Country Town.....

Date of birth Sex M F

Italian Taxpayer Identification N.

Contact information:

Mobile Phone

E-mail address

HEREBY REQUESTS

to participate to the selection for the assignment of the Master Thesis Award of the Department of Physics and Astronomy "Galileo Galilei", First Edition

HEREBY DECLARES

under his/her own responsibility, in compliance with the art. 46 and 47 of the D.P.R. 445/2000:

• to have obtained the Master's Degree in
at the University of Padua, on (date)
with a thesis entitled
thesis supervisor.....

- to promptly communicate any change of contact information included in the application form;
- to be aware of all the rules contained in the competition announcement.

The undersigned also declares to be informed that, according to and as results of the GDPR EU Reg. 2016/679, personal data will be only treated, with ICT tools as well, within the procedure for which this declaration is produced.

Attached documents:

1. copy of a valid personal identity document (not necessary if the application form is submitted via PEC and has a certified digital signature affixed to it);
2. abstract of the master thesis, in English or Italian (max 2000 characters),
3. a list of max. 5 points which express the innovative nature of the thesis work

Date

Applicant's signature.....