

**SELF-DRAFTED CERTIFICATION AND STATUTORY DECLARATION PURSUANT TO ARTICLES 46, 19 AND 47 OF PRESIDENTIAL DECREE NO. 445 OF 28 DECEMBER 2000**

With reference to the application for admission to the public selection announcement based on qualifications and examinations, for the recruitment of n. of n. 1 research Technologist on a full-time fixed-term contract (salary scale d3), for 36 months, at the department of medical, oral and biotechnological sciences of the “G. d’Annunzio” University of Chieti-Pescara, for the needs of the project “identification and study of new compounds for the treatment of diseases with a high need for eye care”, pursuant to art. 24-bis of law n. 240 of 30.12.2010, to the national collective bargaining agreement of 19.04.2018 since compatible, and to the national collective bargaining agreement of 16.10.2008 for the parts still applicable.

**Selection Announcement Code: 2020-1TECNDISMOB**

(Ref.: D.D. prot. n. 42548 of 16/7/2020, rep. n. 216/2020 published in the Official Journal of the Republic (G.U.) IV special selection and examinations series n. 56 of 21/7/2020).

I, the undersigned, .....born  
in ..... prov. (.....) on  
.....and resident in (full address)  
Via.....n.....

Pursuant to and the effects of Art.46 and 47 of the Presidential Decree 445/2000 and under my personal responsibility, aware that making false statements or submitting false documents is a crime punishable by law, as indicated in art. 76 of Presidential Decree 445 of 28 December 2000,

**DECLARE:**

that I hold the following assessable qualifications, pursuant to art. 4 of the selection announcement:

<b><u>Art. 4, point 1 of the selection announcement</u></b>			
<b>DEGREE MARK</b>			
<b>Academic Qualification*</b>	<b>University awarding qualification</b>	<b>Graduation date (day/month/year)</b>	<b>Mark*</b>
<i>First cycle qualifying Degree (LT ex D.M. 509/1999 – D.M. 270/2004)</i>  <i>classi SNT/03 - L/SNT3</i>  Or  <i>Second cycle specialist qualifying Degree (LS ex D.M. 509/99)</i>  <i>Second cycle qualifying Degree (LM ex D.M. 270/2004)</i>  <i>classi SNT/03/S - LM/SNT3</i>			
.....	.....	.....	.....
.....			

\* Please specify the Academic Qualification and the relative mark of the LT, LS or LM indicated for access to selection

<b><u>Art. 4, point 2 of the selection announcement</u></b>			
<b>PREVIOUS PROFESSIONAL EXPERIENCE IN ADVANCED CRYOPRESERVATION SYSTEMS; EXPLANT AND CELL CULTURE TECHNIQUES, CYTOMETRY, IMMUNOCYTOCHEMISTRY.</b>			
<b>Type of professional experience</b>	<b>Institution where the experience has been carried out</b>	<b>Period (from day/month/year to day/month/year)</b>	<b>Activity description</b>

<b><u>Art. 4, point 3 of the selection announcement</u></b>			
<b>PROFESSIONAL QUALIFICATIONS</b>			
<b>Type of qualification</b>	<b>Institution where the qualification has been carried out (registered name and full address)</b>	<b>Period (from day/month/year to day/month/year)</b>	<b>Activity description</b>

<b><u>Art. 4, point 4 of the selection announcement</u></b>		
<b>TECHNICAL AND/OR SCIENTIFIC AND/OR PROFESSIONAL TRAINING, OTHER THAN COURSES AIMED AT GAINING LANGUAGE OR COMPUTER SKILLS</b>		
<b>Type of Course</b>	<b>Public Institution/Body awarding qualification or certificate (registered name and full address)</b>	<b>Period (from day/month/year to day/month/year)</b>

THE UNDERSIGNED DECLARES HAVING READ THE INFORMATION SHEET REGARDING THE HANDLING OF PERSONAL DATA, "INFORMATION ON SELECTION PROCEDURES-EMPLOYEE AREA" PUBLISHED ON THE UNIVERSITY WEBSITE AT: [WWW.UNICH.IT/PRIVACY](http://WWW.UNICH.IT/PRIVACY).

DATE .....

SIGNATURE

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