

**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 to recruit n. 01 research Technologist on a full-time fixed-term contract (salary scale D4), for 36 months, at the Department of innovative technologies in medicine & dentistry (DITIM&O) of the “G. d’ANNUNZIO” University Of Chieti-Pescara, in order to carry out technical and administrative support activities for *“Identification of new predictive biomarkers relevant for the non-invasive molecular and imaging diagnosis of specific inflammatory and degenerative diseases and for the monitoring of therapies from a personalized medicine point of view; - Management and analysis of tissues and cell cultures in optical and electron microscopy to support the development of innovative basic, clinical and integrated research protocols, aimed at advancing scientific knowledge in the field of oral and systemic pathologies, as well as the management of the related data for the specific skills and functions of Biomedical Laboratory Technicians”* in the project “Innovation ecosystem: innovation, digitalisation and sustainability for the diffused economy in central Italy (VITALITY)”, 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: 2022-02TECN-VIT**

(Ref.: D.D. prot. n. 63020 del 9/9/2022, rep. n. 369/2022, published in the Official Journal of the Republic (G.U.) IV special selection and examinations series n. 72 of 9/9/2022).

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>
Master Degree ..... .....			

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

**Art. 4, point 2 of the selection announcement**

**PREVIOUS PROFESSIONAL EXPERIENCE IN ADVANCED ELETRONIC AND CONFOCAL MICROSCOPIC SYSTEM; OF EXPLANT AND CELL CULTURE TECHNIQUES, CYTOMETRY, IMMUNOCYTOCHEMISTRY**

**CODE 2022-01TECN-VIT**

<b>Types of experience</b>	<b>Institution</b>	<b>Period</b> (from day/month/year to day/month/year)	<b>Activity description</b>

**Art. 4, point 3 of the selection announcement**

**PROFESSIONAL QUALIFICATIONS (EXPERIENCE AND OTHER POSITIONS SUCH AS, FOR EXAMPLE, TECHNICAL-SCIENTIFIC COLLABORATION CONTRACTS, SCHOLARSHIP AND OTHER SIGNIFICANT EXPERIENCES)**

<b>Types of professional qualifications</b>	<b>Institution where the experience has been carried out</b>	<b>Period</b> (from day/month/year to day/month/year)	<b>Activity description</b>

**Art. 4, point 4 of the selection announcement**

**TECHNICAL AND/OR SCIENTIFIC AND/OR PROFESSIONAL TRAINING, OTHER THAN COURSES AIMED AT GAINING LANGUAGE SKILLS AND ICT COMPETENCES.**

<b>Types of Course</b>	<b>Public Institution/Body awarding qualification or certificate</b> (registered name and full address)	<b>Period</b> (from day/month/year to day/month/year)

**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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