

- Other matr. n. graduation date
 grade at (name of the School)
- any Equivalences – Diplomas achieved under previous legislation (state law reference)

 University credits (acquired through earlier Courses/Master)

Characterizing examinations of profit related to the chosen course, if required
 (Check the respective announcement of competitive exam, in a such case the candidate is advised to enclose certificates with exams and grade)

DENOMINATION	GRADE	DATE
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.....

** (fill in only when requested in the admission requirements of the announcement of competitive exam)*

Graduation or Diploma thesis in

➤ School of Specialization in University of
 matr. n. grade date University credits

➤ Ph.D. in University of

➤ matr. n. grade date University Credits ..

➤ Courses of Higher Permanent and recurrent Education in
 University of date University credits ..

Specialization Coursework Training or Postgraduate Education Seminars in
 .. University of date University credits ..

➤ Language courses and stays abroad

➤ Qualification to Exercise Profession in
University of matr. n. grade date

➤ Teaching Qualification YES NO

Competition Class Qualification/Suitability year of achievement

➤ SSIS YES NO address

➤ Other

**(fill in only when requested in the admission requirements of the notice of competition)*

Language knowledge

	Mother tongue	Excellent	Good	Discreet	Elementary
Italian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
German	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Work Experience

Roll Teacher Not in Roll

Company/school Institute where you are working actually.....

Field of activity of the Company.....

Currently covered position

From..... term contract to

permanent contract

➤ Functional Area / Professional Qualification.....

The undersigned applicant declares to have read in full the announcement of the competition exam, and to be aware of:

- the terms concerning the completion of any competition tests and therefore, dispenses the competent offices from sending the related communication
- the prohibition to apply contemporarily to a Master or a graduate course, Specialized degree and/or master-level degree, Specialization graduate school, Specialization graduate school of the medical field or Ph.D.. The suspension can however be allowed for the courses above mentioned, with the exception of the PhDs, Schools of specialization in the medical field and those for (SSIS) teachers until the end of attendance of the Master.
- as prescribed by art. 76 of DPR 445/2000 on penal liability which can be incurred in case of mendacious declarations and at arts. 46 and 47 of the D.P.R. 445/2000
- authorizes the possible communication of personal data (as at D.Lgs. 30.06.2003, n. 196
- foreign applicants must enclose documents written in foreign language, accompanied by an official translation into the Italian language, furnished with legalization and declaration of local value, provided by the competent Italian representative responsible for the territory.

ANNEXES	YES	NO
Payment slip. CX - Contribution Printed matter	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum (containing all University and extra University formative activities)	<input type="checkbox"/>	<input type="checkbox"/>
Copy of a document of recognition	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Social security document	<input type="checkbox"/>	<input type="checkbox"/>
Other (<i>specify</i>)	<input type="checkbox"/>	<input type="checkbox"/>

Date

 Details of identification document

 Issue on

 signature