***FULL TIME DECLARATION – DECLARATION OF NON INCOMPATIBLE ACTIVITIES BY CANDIDATES***

I, the Undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

born in (city)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) on (dd/mm/yy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resident in (city) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_), ZIP Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

aware of the penal sanctions in case of false declarations, or use of false acts, as stated in art. 76 D.P.R. 445/2000, under my own responsibility

***DECLARE THAT***

* I am aware that the enrolment to a Ph.D. Course means the full commitment to it, and is incompatible with any kind of full-time job, except for jobs that are coherent and functional with the Ph.D. Course. In this case, there must be an official authorization by the Board of Professors, attesting the compatibility between the full-time job and the Doctorate Course.
* I am aware that should I have a full-time payed job, I will withdraw from the fellowship bestowed for the full period during which I will be attending the Ph.D. Course and work simultaneously.
* I am not carrying out any incompatible activity with the enrolment to the Ph.D. Course.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(signature)*

DATE (dd/mm/yy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_