



Università
Ca' Foscari
Venezia

DECLARATION OF PHD SCHOLARSHIP ACCEPTANCE

THE UNDERSIGNED (FULL NAME) _____

BORN IN _____ DATE _____

CURRENT ADDRESS _____

TEL. _____, E-MAIL _____

FISCAL CODE _____

WINNER OF THE PHD SCHOLARSHIP IN _____

CYCLE: ____, ACADEMIC YEAR _____

DECLARES

- to not have previously benefited from another PhD scholarship, not even partially;
- to have previously benefited from another PhD scholarship, even if partially;
- to not be receiving any other scholarship except those granted by national or foreign institutions for research abroad, committing to communicate any changes that may occur during the course of the carrier in advance;
- to be employed by an Italian Public Administration and to take advantage of allocated paid leave, giving up the scholarship.

ONLY FOR THEMATIC SCHOLARSHIP WINNERS

DECLARES

- to accept the scholarship on a thematic subject and to commit themselves to carrying out the aforementioned research during the entire PhD course. They also declare to accept any further obligations under the call for application (Annex A).

ONLY FOR ITALIAN RESEARCH GRANT HOLDERS OR OTHER TYPE OF POST GRADUATE SCHOLARSHIP

DECLARES

- as holder of this research grant with contract no. ____ of Rep. ____ date __/__/____ stipulated with the University of _____ or with the Research Organisation _____, to have started / to start the research on __/__/____ and that the research will end on __/__/____. And to also be aware that the research grant is incompatible with the doctoral grant.

VENICE, _____

SIGNED _____

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