**Application Form**

Al **Magnifico Rettore**

**dell'Università Commerciale “Luigi Bocconi”**

Via Sarfatti 25

20136 MILANO

I, the undersigned ............................................................. born in ..........................................on (DoB) ........................... resident in ....................................... address ......................................... house number.............postcode......................... e-mail.........................................tel.....................................................mobile...................................................

**ASKS**

to be admitted to the selection, by means of qualifications and exam, relating to the competition number\_\_\_\_\_\_\_\_\_ of (date)\_\_\_\_\_\_\_\_ for the assignment of **1 collaboration contract for the duration of 5 months,** to undertake research activity at the Finance Department of Bocconi University.

To this end, I declare:

1. to be a citizen of ......……………….......................…
2. that my current address is ……………………….. postcode .……….., ………………………..………..tel. …………………… , (any changes to this address will be promptly communicated)
3. to have a PhD in .....................................................from the University.........................., conferred on (date).....................................................with a grade of...................................................................;
4. to be in the possession of other qualifications (if applicable);
5. Fiscal Code (if applicable) …………………………………;

I, the undersigned, attach to my application:

1. a scientific, professional curriculum vitae;
2. certificates/qualifications in my possession.

Date ………………… Signature……………………………..

N.B.: documents and qualifications must be presented in pdf format. By completing this form, the candidate declares that any documents produced are exact copies of the original. Any false declarations will be punished by Law.

Date …………………………… Signature ….…………………………