ADDITIONAL DECLARATIONS FOR SCHOLARSHIP HOLDERS

to be completed only if scholarship recipient

Declaration to be attached for PhD students in the online registration procedure

I, the undersigned _____

DECLARE THAT I AM AWARE THAT

a) the scholarship which is the subject of this declaration may not be accumulated with other scholarships for any reason whatsoever awarded except with those granted by national or foreign institutions useful for integrating, with stays abroad, the training or research activities of the scholarship holders (art. 6, paragraph 1, of Law no. 398 of 30.11.1989)

b) those who have received a scholarship may not receive it a second time for the same reason (Article 6(2) of Law No. 398 of 30.11.1989);

c) Article 1 (a) of Law 315/98 provides that, as of 1 January 1999, the Ministry of Education, Universities and Research (MIUR) is required to ensure that the provisions of Article 2, paragraph 26, first sentence of Law 335/95, as well as those of Article 59, paragraph 16 of Law 449/97, as amended (INPS compulsory general insurance) are applied to scholarships granted for attendance at PhD courses;

d) Civil servants who benefit from the scholarships that are the subject of this declaration are extended the possibility of requesting special leave for study purposes without allowances, as provided by Article 2 of Law no. 476/1984 (Article 6, paragraph 7, Law no. 398/89).

I, the undersigned, pursuant to Articles 46 and 47 of Presidential Decree no. 445 of 28.12.2000, aware of the responsibility I assume in the event of untrue declarations

DECLARE

a) that **I do not benefit**, for the entire duration of the PhD course, from other scholarships of any kind, except those granted by national or foreign institutions useful to integrate, with stays abroad, the training or research activities of the scholarship holders (art. 6, paragraph 1, of Law 30.11.1989, n. 398)

b) that **I have not already received**, even partially, another scholarship for attendance of PhD courses (art. 6, paragraph 2, law 398/89)

c) that **I am not the holder** of a grant for collaboration in research activities as per art. 51, paragraph 6, of Law 449/97 and Ministerial Decree of Il.02.1998

d) to be aware of the obligations and rights of doctoral students, as specified in the notices of competition for admission to PhD courses or addresses published on the website of the University of Modena and Reggio Emilia: https://www.unimore.it/en/university/calls?field_categoria_target_id=94&title=;

e) to have read and fully understood the regulations relating to the PhD course, published on the University of Modena and Reggio Emilia website: https://www.unimore.it/it/ateneo/statuto-e-regolamenti/normativa-post-laurea;

f) to consent to the processing of their personal data, including sensitive data, in accordance with EU Regulation 2016/679 and Legislative Decree no. 196/2003 as amended by Legislative Decree 101/2018, and is aware that the database is the property of the University of Modena and Reggio Emilia.

ADDITIONAL DECLARATIONS FOR SCHOLARSHIP HOLDERS

to be completed only if scholarship recipient

Aware of the responsibility it assumes in the event of untrue declarations, pursuant to Articles 46 and 47 of Presidential Decree No. 445 of 28.12.2000,

I, the undersigned (surname)_____(Name)_____

Tax code _____ born in _____ IT Province _____

Foreign Country_____ on _____

resident in _____ n° _____ Town _____

Postal Code_____ IT prov._____

Phone_____ Mobile _____ E-mail _____

Domicile (if different from residence) in _____ n° _____

Town _____ Postal Code_____ IT prov._____

I REQUEST that the amount relating to the scholarship:

be paid into the bank account in the name of: _____

(it may not be in the name of others, even if by proxy; it may be jointly held, in which case please

indicate all the joint account holders)

with IBAN code _____

The code consists of 27 characters: IT, 2 international numeric control characters, 1 national alphabetic control character (CIN), 5 numeric characters for the ABI code, 5 numeric characters for the CAB, 12 alphanumeric characters for the account number.
Please note, in order to avoid misunderstandings in the crediting of fees, the above fields must be filled in correctly and completely. In case of doubt, please contact your bank branch.
Please note that the bank charges relating to the transfer are borne by the service provider.

The undersigned undertakes to promptly enrol in the INPS separate management scheme (via the website www.inps.it - by searching for the service "Enrolment of para-subordinate workers to the Separate Pension Scheme" and "Use service" or by contacting the Contact Centre, again via www.inps.it and to send by e-mail to ufficiostipendi@unimore.it to the Accounting and Salaries Office of the University of Modena and Reggio Emilia the self-certification form of the registration (*if the doctoral student is already registered with the INPS separate management scheme by virtue of previous collaborative relationships with other clients, he/she need only send the self-certification form certifying registration*).

Payment of the monthly instalments of the grant is made with a fixed value date of the 25th day of the following month. The relevant coupons will be available exclusively online at the following link: https://unimore.u-web.cineca.it/
If during the year of reference any changes should occur with respect to what has been declared, the undersigned undertakes to notify the University of Modena and Reggio Emilia immediately by email, exonerating it from any responsibility in this regard.

Date _____   _____

Signature (legible and in full)