

**PhD Program in** \_\_\_\_\_

*To the Rector of the University  
of Naples "Parthenope"  
Ufficio Dottorati di Ricerca  
Via Acton n. 38 80133 Napoli*

The undersigned \_\_\_\_\_,  
born on (Date) \_\_\_\_\_, in (Town) \_\_\_\_\_,  
(Province) \_\_\_\_\_, (Country) \_\_\_\_\_,  
resident in (Town) \_\_\_\_\_, (Province) \_\_\_\_\_,  
(Country) \_\_\_\_\_, at (Address) \_\_\_\_\_,  
postcode \_\_\_\_\_, Phone: \_\_\_\_\_,  
e-mail: \_\_\_\_\_

Codice Fiscale (tax code number/ NIN)																				
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address selected for the purposes of the selection (to be filled in *only if* different from the place of residence):

Address \_\_\_\_\_,  
Postcode \_\_\_\_\_, City \_\_\_\_\_, Province \_\_\_\_\_

*A P P L I E S*

to compete to other forms of financial support which could be made available to the winners of the competition of the XXXVII Ph.D. program

Date, \_\_\_\_\_ Signature (full and readable), \_\_\_\_\_