PhD Program in_____

To the Rector of the University of Naples "Parthenope"
Ufficio Affari Generali
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)																

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 XXXV Ph.D. program

Date,_____ Signature (full and readable), _____