EXCERPTS FROM THE CALL:

BANDO DI SELEZIONE PER IL CONFERIMENTO DI UN ASSEGNO PER LO SVOLGIMENTO DI ATTIVITA' DI RICERCA DI CATEGORIA B) – TIPOLOGIA I
FINANZIATO CON I FONDI DEL PRIN 2022 codice progetto 2022AKRC5P
CUP MASTER B53D2300918 0006 - CUP B53D23009180006
Responsabile Scientifico dott. Domenico Monaco

THE LEGALLY-BINDING VERSION IS THE ITALIAN ONE, WHICH YOU SHOULD TRANSLATE AND READ CAREFULLY (NO "OFFICIAL" ENGLISH TRANSLATION IS AVAILABLE):
THIS IS ONLY A SHORT VERSION HIGHLIGHTING SOME IMPORTANT INFORMATION!

Art. 1
(Research project)

The call is for a **one-year position ("assegno di ricerca")** within the research project **"**Interacting Quantum Systems: Topological Phenomena and Effective Theories**"** – P.I.: dr. Domenico Monaco – which is hosted by the Department of Mathematics "Guido Castelnuovo" of Sapienza University of Rome.
The position is funded by PRIN 2022 - Interacting Quantum Systems: Topological Phenomena and Effective Theories - CUP: B53D23009180006.

Art. 2
(Duration and salary)

The position is for 1 year. You cannot have more than a total of 12 years of "assegni di ricerca" in Italy, including this one.
Gross yearly salary is **€ 30.000,00**; this comes to approx**. € 2.200 per month** after taxes.

Art. 3
(General admission requirements)

In order to apply, you must have a **Master degree in Mathematics or Physics** from an Italian university, or an equivalent degree/title from a foreign university. The degree should be awarded before the end of the call (see next Article).

A Ph.D. degree or equivalent title is a preferential qualification, but it is not mandatory to have in order to be able to apply.

If you obtained your degrees within the European Union, they will be considered to be equivalent to Italian ones during the evaluation procedure. However, the person who gets the position will be asked to make their degrees from non-EU universities/institutions to be certified as "equipollente" to the Italian ones. This certification comes from the Ministry of University and Research.

Art. 4
(Application)

The **sharp** deadline to submit your application is **29.01.2024 at 23:59, Italian time**. Your application **will be rejected** if it comes after this time. In order to present your application, you'll need to fill in the form indicated as "Annex A" (**Allegato A**), together with a series of other annexes (**Allegato B, Allegato C, Allegato D**), see below.

There are two ways to submit your application. If you submit your application in other ways **your application will be rejected**.

- You can send it by **Certified Electronic Mail (Posta Elettronica Certificata, PEC)** to the account matematica@cert.uniroma1.it using the subject line "Candidatura alla procedura comparativa Bando AR n. 10/2023".
  PEC is an Italian certified email that requires opening a specific account, which will verify your identity and legally "certify" to the Italian Public Administration that the sender of the emails from that account is you. **Standard electronic email accounts (Gmail, Yahoo, Hotmail, institutional emails…) do not count as PEC accounts**: unless you have applied for a similar position in Italy before, you'll probably need to open a new personal account. One provider of PEC accounts, for example, is ARUBA; there are many other providers online. In case you do decide to open a PEC account, please note that:
  - The procedure may come at a cost of a few euros;
  - The procedure **may take several days to complete**, since you will have to identify yourself to the provider;
  - Not all providers are "foreign-friendly", and may require you to have an Italian "codice fiscale" or an address in Italy already;
  - You should make sure that in the end the PEC account shows as a personal address (e.g. it has your name in the handle), and not associated to other people or institutions. In particular, **you cannot use someone else's PEC account to submit your application** – your application will be rejected if you do.
- Alternatively, you can send your application by mail as **registered mail with proof of receipt (return receipt or "avis de réception") – standard, unregistered mail is not accepted**. If your country does not admit a form of proof of receipt when sending a mail by post, a simple registered mail is enough; if it does, you should ask for the registered mail with proof of receipt. The easiest way to submit all documents you'll need to provide for the application (Annex A which is the application proper, the other Annexes B-C-D, the certificates and other documents related to your titles and qualifications, as detailed below) is to print out Annexes A to D, a copy of your C.V. and an identification document (see the indications below) , put all PDF files for the other documents (certificates, letters of support,…) on a USB stick, and send the print-outs together with the USB stick by post. The mail should be addressed to

  Direttrice del Dipartimento di Matematica Guido Castelnuovo
  c/o Sapienza Università di Roma
  Piazzale Aldo Moro, 5 – 00185 Roma

  and you should also write on the envelope

  Candidatura alla procedura comparativa Bando AR n. 10/2023

  Make sure that the date your mail is processed by the post office is before the deadline of 29.01.2024.

Even if you don't have a PEC, you'll be asked to indicate a **personal email address** (standard ones are OK in this case) where you'll receive all communications pertaining to the procedure. If you want to change your address during the procedure, you should contact the Department, see Art. 15 below.

Your application should include all titles and qualifications that you consider relevant for the evaluation of your profile. You can also include letters of support to your candidature from other academics, which should be attached to the application as PDF files. If the file is encrypted, the writer of the cover letter should send the password to concorsi.matematica@uniroma1.it, including the name of the candidate and a mention to "Bando AR n. 10/2023" in the subject line.

The application must include the following information/documents: if something is missing, **the application will be rejected**. If something doesn't apply to you, you should declare explicitly that it doesn't apply in the application. (Note however that "Annex A" and the other annexes are formulated in such a way that all these information will be covered: please make sure to include all relevant documents.)

- Name and surname of the applicant;
- Date and place of birth;
- Place where you live;
- Citizenship;
- Declaration that you were never, nor are currently, convicted by some court of law;
- Master degree with final grade, date in which it was awarded, and institution that awarded it;
- (if applicable) Ph.D. degree or equivalent title;
- (only for applicants who got their degrees outside of the EU) Declarations that your degrees are considered "equipollente" to Italian degrees; if your title is not "equipollente", you should attach some certification of the legal value of your title, which is normally provided by the Italian embassy in the country where the degree was awarded;
- Declaration that your scientific curriculum is pertinent to the research project;
- Information about previous "Assegni di ricerca" positions you may have held in Italy in the past;
- Information about previous "Ricercatore a tempo determinato" positions you may have held in Italy in the past;
- Declaration that you won't have, or that you will give up, any other concurring fellowships, in case you get the position;
- Declaration about your current position;
- Declaration that you are not related to professors of the Department of Mathematics or to the Rector, General Director, or members of the Board of Administration of Sapienza;
- Declaration that you were never fired by a position in any Italian Public Administration;
- A physical address and an email address were you will receive all communications pertaining to the procedure (you should receive all communications via email anyway, but you are required to indicate a physical address as well);
- A copy of a document of identification (e.g. ID card or passport).

If you have a medical condition that entitles you to have some help for the interview, you should contact the Evaluation Committee and the Administrative Responsible for the procedure (see Art. 15 below).

Art. 5
(Titles and curriculum)

All titles are listed multiple times in the various Annexes (for different reasons). All annexes should be filled in, even if some of the situations are not relevant to your situation (you should state so explicitly).

Annex A is the application proper.

Annex B pertains the situation in which you are currently enrolled in a Ph.D. programme without a fellowship, and/or if you ever held "Assegni di Ricerca" or "Ricercatore a tempo determinato" positions in Italy.

Annex C contains:

1. A list of all the exams you passed in your Master degree, including the final exam, together with the grades you got;
2. Information about your Ph.D. degree or equivalent title, if applicable;

3. A list of all the certifications you will attach to your applications (including e.g. contracts, letters of support, etc.), as you will have already stated in Annex A.

You should also attach a **C.V.** with your experiences relevant to the position.
Annex D pertains publications, if you have any: you should list them here and attach their PDFs (in Annex D you are declaring that the attached PDFs are unaltered copies of the originals).
Finally, an **identification document** must be attached to the application (otherwise your application will be rejected): you should include also the current date and your signature. If you have them, you have to attach also a back-and-front copy of your Italian "codice fiscale" or "tessera sanitaria", again with date and signature.

All titles that you are attaching to the application should be in Italian, English, French, Spanish, or German. If you want to attach a document in a different language, that must be translated to Italian, and the translation must be legally certified as conformal to the original document.

In the evaluation, your titles will award you a maximum of **40 points**. In order to access the interview, you must have been awarded **at least 15 points**. Points are expressed out of 100.

Art. 6
(Selection)

The Evaluation Committee will produce a list of criteria and assign to each of them a number of points out of 100. These will include:

- ✔ Ph.D. degree;
- ✔ Final grade for the Master degree;
- ✔ Any publication or other products of research;
- ✔ Any post-graduate "perfezionamento" diploma, or medical doctor degree [does not apply to this procedure];
- ✔ Any other titles [the ones you will have listed, and whose certification you will have attached], like having held research positions in universities or other research institutions; these should specify when they were held and the duration of the position;
- ✔ Interview.

The evaluation of the titles will be communicated to those who are admitted to the interview at the email address indicated in the application.

Art. 7
(Interview)

You can access the interview with an evaluation of your titles of at least 15 points.
You will be notified of the interview date and time at least 20 days in advance, at the email address indicated in the application. It may take place in presence or online.
You will need to have an identification document ready during the interview.
The interview will focus on the themes of research of the project **"**Interacting Quantum Systems: Topological Phenomena and Effective Theories**"**. The candidate will present the research results which they obtained and that they deem relevant to the project.
The maximum number of points awarded to the interview is **60 points**.

Art. 8
(Evaluation Committee)

The Evaluation Committee, to be appointed by the Director of the Department, will be made of three members: a Full Professor and other two professors or researchers from Sapienza or other related institutions.

Art. 9
(List of selected candidates)

In the first meeting, the Committee establishes the criteria to evaluate the titles presented by the applicants. After the evaluation of titles and the interviews, a list of selected candidates is produced, in decreasing order. Going down the list, the Director of the Department appoints the winning candidate.

Art. 10
(Appointment of "assegni di ricerca")

[This article regulates certain procedures the winning candidate should comply to when they are appointed within the first month of the start of the position ("presa di servizio"). These will be taken care of together with the Administrative Office of the Department.]

Art. 11
(Rights and obligations)

The "assegnista di ricerca" must work within the research project which funds their position. They have access to the facilities of the Department and can collaborate (but are not mandated to) in duties like supervision of theses or exams. They can access funds for the reimbursement of expenses during scientific missions. They must write a yearly report on their activities, which is evaluated by the P.I. of the project. They should comply with the Code of Conduct and with the Codes for Health and Safety of Sapienza.

Art. 12
(Incompatibility and suspension)

An "Assegno di ricerca" is incompatible with:

- Other sources of taxable income for at least €16.000 per year; this includes other "Assegni di ricerca";
- Other fellowships;
- Being enrolled in a University degree programme or Ph.D. degree programme.

Art. 13
(Termination of contract)

If

- the activity doesn't start or is late without justification,
- the activity is suspended for an extended period without justification,
- the "assegnista di ricerca" falls in one of the incompatible situations described in Art. 12,
- the Department formulates a negative evaluation,

the contract can be terminated.

Art. 14
(Publicity to the procedure)

The call can be found online at

https://web.uniroma1.it/trasparenza/bandi_trasparenza

http://bandi.miur.it

https://euraxess.ec.europa.eu

Art. 15
(Administrative Responsible of the procedure)

The person of contact is Dott.ssa Rosanna Briscese.
(tel. +39 06 49913271- rosanna.briscese@uniroma1.it)

Publication date of the call:	**20.12.2023**
Deadline to submit the application:	**29.01.2024**

INFORMATIVA AI SENSI DEGLI ARTT. 12, 13 E 14 DEL GDPR (GENERAL DATA PROTECTION REGULATION) 2016/679 E DELLA VIGENTE NORMATIVA NAZIONALE

[This is the privacy declaration, which contains quite standard information.
All your data collected for the purposes of the procedure will be used only within the evaluation procedure.]

ALLEGATO A

REMOVE YELLOW-HIGHLIGHTED NOTES AFTER FILLING IN THE FORM
GREEN-HIGHLIGHTED NOTES ARE DETAILS YOU SHOULD FILL IN

"ANNEX A" IS THE APPLICATION FORM PROPER.
IF YOU SEND THIS FORM BY PEC-EMAIL, THE SUBJECT LINE SHOULD READ
"CANDIDATURA ALLA PROCEDURA COMPARATIVA - BANDO AR n. 10/2023"

Al Direttore del Dipartimento di Matematica
Guido Castelnuovo
Sapienza Università di Roma
Piazzale Aldo Moro, 5
00185 Roma

Il/La sottoscritto/a [KEEP "Il sottoscritto" IF MALE, "La sottoscritta" IF FEMALE] __NAME SURNAME__
Nato/a [KEEP "Nato" IF MALE, "Nata" IF FEMALE] a __PLACE OF BIRTH__ prov. di __PROVINCE, REGION… OF PLACE OF BIRTH, IF APPLICABLE__ in data __DATE OF BIRTH__
e residente a __CITY WHERE YOU LIVE__ (Prov. __PROVINCE, REGION… OF CITY WHERE YOU LIVE, IF APPLICABLE__) in __FULL ADDRESS__ (Cap. __ZIP CODE__)
chiede di essere ammesso/a [KEEP "ammesso" IF MALE, "ammessa" IF FEMALE] a partecipare alla procedura selettiva pubblica, per titoli e *colloquio* per il conferimento di n. 1 assegno di ricerca della durata di 1 anno, avente il seguente progetto di ricerca "Interacting Quantum Systems: Topological Phenomena and Effective Theories" - **SC 01/A4 – SSD MAT/07 "Fisica matematica"** – Responsabile Scientifico dott. Domenico Monaco - presso il Dipartimento di Matematica Guido Castelnuovo di cui al Bando AR n. 10/2023 pubblicato in data 20.12.2023.

A tal fine, ai sensi degli artt. 46 e 47 del DPR 28.12.2000 n. 445, consapevole delle sanzioni penali, nel caso di dichiarazioni non veritiere e falsità negli atti, richiamate dall'art. 76 D.P.R. 445 del 28.12.2000, dichiara sotto la propria responsabilità:

1) di possedere il curriculum scientifico-professionale idoneo allo svolgimento dell'attività di ricerca; [HERE YOU DECLARE THAT YOU HAVE A SCIENTIFIC CURRICULUM MATCHING THE RESEARCH PROJECT]
2) [CHOOSE AND FILL IN ONE OF THE FOLLOWING OPTIONS, THEN REMOVE THE OTHERS]

[IF YOU WERE AWARDED YOUR MASTER DEGREE WITHIN THE EUROPEAN UNION…] di aver conseguito il Diploma di laurea in __NAME OF YOUR MASTER DEGREE (E.G. MATHEMATICS, PHYSICS…)__ in data __DATE WHEN YOU WERE AWARDED YOUR DEGREE__ presso l'Università di __UNIVERSITY WHICH AWARDED YOUR DEGREE__ con il voto di __FINAL GRADE OBTAINED__

[IF YOU WERE AWARDED YOUR MASTER DEGREE OUTSIDE OF THE EUROPEAN UNION, BUT YOUR DEGREE WAS DEEMED "EQUIPOLLENTE" TO AN ITALIAN DEGREE BY THE ITALIAN MINISTRY OF UNIVERSITY AND RESEARCH… (IF YOU DON'T KNOW WHAT "EQUIPOLLENTE" MEANS, THIS MOST PROBABLY DOESN'T APPLY TO YOU!)] del titolo di studio straniero di __FULL NAME OF YOUR ORIGINAL DEGREE (E.G. MASTER DEGREE IN MATHEMATICS, MASTER DEGREE IN PHYSICS…)__ conseguito il __DATE WHEN YOU WERE AWARDED YOUR DEGREE__ presso __UNIVERSITY WHICH AWARDED YOUR DEGREE__ e riconosciuto equipollente alla laurea italiana in __NAME OF THE "EQUIPOLLENTE" ITALIAN DEGREE__ dall'Università di __UNIVERSITY WHICH AWARDED YOUR "EQUIPOLLENTE" TITLE__ in data __DATE WHEN YOUR DEGREE WAS DEEMED "EQUIPOLLENTE"__

[IF YOU WERE AWARDED YOUR MASTER DEGREE OUTSIDE OF THE EUROPEAN UNION, AND YOUR DEGREE WAS NEVER DEEMED "EQUIPOLLENTE"…] del titolo di studio straniero, che non è stato dichiarato equipollente, di __FULL NAME OF YOUR ORIGINAL DEGREE (E.G. MASTER DEGREE IN MATHEMATICS, MASTER DEGREE IN PHYSICS…)__, conseguito il __DATE WHEN YOU WERE AWARDED YOUR DEGREE__ presso __UNIVERSITY WHICH AWARDED YOUR DEGREE__ al quale si allega traduzione, legalizzazione e dichiarazione di valore [YOU SHOULD ATTACH A TRANSLATION OF THE DEGREE, A CERTIFICATE OF LEGAL VALUE ("LEGALIZZAZIONE") AND A CERTIFICATE OF VALIDITY ("DICHIARAZIONE DI VALORE"). THESE CERTIFICATES ARE PROVIDED BY THE ITALIAN EMBASSY IN THE COUNTRY WHERE YOU WERE AWARDED YOUR DEGREE.];

3) [THIS POINT PERTAINS PH.D. DEGREES AND EQUIVALENT TITLES. IF YOU DON'T HAVE ONE, REMOVE THIS POINT ENTIRELY; OTHERWISE, CHOOSE AND FILL IN ONE OF THE FOLLOWING OPTIONS, THEN REMOVE THE OTHERS]

[IF YOU HAVE A PH.D. DEGREE WHICH WAS AWARDED WITHIN THE EUROPEAN UNION…] di aver conseguito il titolo di dottore di ricerca in __NAME OF YOUR PH.D. DEGREE (E.G. MATHEMATICS, PHYSICS…)__, in data __DATE WHEN YOU WERE AWARDED YOUR PH.D. DEGREE__ presso __NAME OF UNIVERSITY OR OTHER ISTITUTION WHICH AWARDED YOUR PH.D. DEGREE__

[IF YOU HAVE A TITLE FROM WITHIN OR OUTSIDE THE EUROPEAN UNION WHICH CAN BE CONSIDERED AS EQUIVALENT TO A PH.D. DEGREE AWARDED WITHIN THE EUROPEAN UNION…]

di aver conseguito il seguente titolo, equivalente al titolo di dottore di ricerca: __INDICATE HERE ALL RELEVANT DETAILS (NAME AND TYPE OF DEGREE, DATE WHEN IT WAS AWARDED, INSTITUTION WHICH AWARDED IT)__

[IF YOU DON'T HAVE A PH.D. DEGREE OR EQUIVALENT TITLE, BUT YOU HAVE HELD ONE OR MORE FACULTY POSITION IN A UNIVERSITY, RESEARCH CENTER OR OTHER RESEARCH INSTITUTION WHICH QUALIFIES YOU WITH AN ADVANCED SCIENTIFIC CURRICULUM…] di essere ricercatore con curriculum più avanzato anche per aver ottenuto la seguente/i posizione/i [KEEP "seguente posizione" IF SINGULAR, "seguenti posizioni" IF PLURAL] strutturate in Università, Enti di ricerca, istituzioni di ricerca applicata, pubbliche o private, estere o, limitatamente alle posizioni non di ruolo, italiane: __INDICATE HERE ALL RELEVANT SPECIFICATIONS (NAME AND TYPE OF POSITION, DATES WHEN IT WAS HELD, INSTITUTION WHERE IT WAS HELD)__;

4) di essere in possesso dei seguenti titoli che si ritengono utili ai fini della selezione:

a) ……..

b) ……..

[HERE YOU SHOULD LIST ALL "CERTIFIABLE" TITLES AND QUALIFICATIONS WHICH YOU BELIEVE ARE RELEVANT TO THE POSITION – YOU PROBABLY LISTED THEM IN YOUR C.V. ALREADY, AND YOU SHOULD LIST THEM HERE AS WELL. THESE CAN INCLUDE (THE LIST IN NON-EXHAUSTIVE):

A) CONTRACTS, POST-GRADUATE FELLOWSHIPS, POST-DOCS, VISITING POSITIONS, OR SIMILAR RESEARCH POSITIONS: YOU SHOULD INDICATE THE TYPE OF POSITION/CONTRACT/FELLOWSHIP, THE START- AND END-DATE OF YOUR CONTRACT, AND THE INSTITUTION WHERE THE POSITION WAS HELD

B) YOUR MASTER AND/OR PH.D. THESIS, IF UNPUBLISHED – OTHERWISE THEY COUNT AS PUBLICATIONS, WHICH ARE LISTED SEPARATELY

C) SCIENTIFIC HABILITATIONS OR QUALIFICATIONS (E.G. TO TEACH AT UNIVERSITIES)

D) AWARDS FOR SCIENTIFIC MERIT

E) LETTERS OF SUPPORT TO THE CANDIDATE FROM OTHER ACADEMICS

ANY CERTIFICATES YOU HAVE FOR THESE TITLES (COPIES OF CONTRACTS; CERTIFICATES OF AWARDS OR HABILITATIONS; COPY OF YOUR MASTER AND/OR PH.D. THESIS; LETTERS OF SUPPORT;…) SHOULD BE ATTACHED TO THE APPLICATION. ALL CERTIFICATES SHOULD BE IN ITALIAN, ENGLISH, FRENCH, SPANISH OR GERMAN – OTHER LANGUAGES SHOULD BE

TRANSLATED TO ITALIAN AND LEGALLY CERTIFIED AS CORRESPONDING TO THE ORIGINAL IN ANOTHER FOREIGN LANGUAGE.

LATER, IN "ANNEX C", YOU WILL PROVIDE AGAIN A LIST OF ALL THOSE TITLES; IN "ANNEX D", YOU WILL DECLARE THAT ALL THE CERTIFICATES YOU ARE ATTACHING TO THE APPLICATION, FOLLOWING THE LIST YOU ARE PRODUCING HERE AND IN "ANNEX C", ARE UNALTERED COPIES OF THE ORIGINALS.

OTHER USEFUL TITLES FOR THE EVALUATION, WHICH YOU MAY WANT TO INCLUDE IN YOUR C.V. BUT WHICH ARE NOT NECESSARILY "CERTIFIABLE" AND THEREFORE DO NOT APPLY HERE, ARE:

i) SCIENTIFIC EVENTS WHICH YOU (CO-)ORGANIZED OR WHERE YOU WERE INVITED SPEAKER

ii) PARTICIPATION OR DIRECTION OF RESEARCH GROUPS

iii) TEACHING DUTIES AT UNIVERSITY OR GRADUATE SCHOOL LEVEL]

5) di essere cittadino __CITIZENSHIP__ e di godere dei diritti politici;

6) [CHOOSE AND FILL IN ONE OF THE FOLLOWING OPTIONS, THEN REMOVE THE OTHERS]

[IF YOU WERE NEVER SENTENCED OR CONVICTED BY LAW…] di non avere riportato condanne penali e di non avere in corso procedimenti penali ed amministrativi per l'applicazione di misure di sicurezza o di prevenzione, né di avere a proprio carico precedenti penali iscrivibili nel casellario giudiziario ai sensi dell'art. 686 del c.p.p.;

[IF YOU WERE SENTENCED OR CONVICTED BY LAW…] di aver riportato la seguente condanna: __TYPE OF SENTENCED YOU RECEIVED__ emessa dal __COURT OF LAW WHICH CONVICTED YOU__ in data __DATE WHEN YOU WERE CONVICTED__;

[IF YOU ARE CURRENTLY ACCUSED OF SOME FELONY AND IN LEGAL ACTION…] avere i seguenti procedimenti penali in corso: __DETAILS OF YOUR CURRENT LEGAL ACTION__;

7) di non essere stato destituito o dispensato dall'impiego presso una pubblica amministrazione per persistente insufficiente rendimento e di non essere stato dichiarato decaduto da un impiego statale, ai sensi dell'art. 127, primo comma, lettera d), del testo unico delle disposizioni concernenti lo statuto degli impiegati civili della Stato, approvato con decreto del Presidente della Repubblica 10 gennaio 1957, n. 3; [HERE YOU DECLARE THAT YOU WERE NOT FIRED FROM SOME ITALIAN PUBLIC ADMINISTRATION OFFICE]

8) [THIS POINT PERTAINS PREVIOUS "ASSEGNI DI RICERCA" THAT YOU MAY HAVE HAD. IF YOU NEVER HAD ONE, REMOVE THIS POINT ENTIRELY; OTHERWISE, FILL IN WITH THE DETAILS OF ANY "ASSEGNO DI RICERCA" YOU PREVIOUSLY HAD]

di essere stato titolare di Assegno di ricerca con le seguenti specifiche:

titolo: __TITLE OF THE RESEARCH PROJECT__, Istituto Universitario __HOST UNIVERSITY OR INSTITUTION__, durata: dal __STARTING DATE OF YOUR CONTRACT__ al __END DATE OF YOUR CONTRACT__;

[REPEAT THE LINE OF ANY "ASSEGNO DI RICERCA" YOU HAD]

9) di non essere titolare di altre borse di studio a qualsiasi titolo conferite o di impegnarsi a rinunciarvi in caso di superamento della presente procedura selettiva, di non partecipare a Corsi di Laurea, Laurea specialistica o magistrale, dottorato di ricerca con borsa o specializzazione medica in Italia o all'estero; [HERE YOU DECLARE THAT YOU WILL NOT HOLD ANY OTHER FELLOWSHIP DURING YOUR "ASSEGNO DI RICERCA" IN CASE YOU GET THE POSITION; THE POSITION IS ALSO INCOMPATIBLE WITH BEING ENROLLED IN ANY ITALIAN OR FOREIGN UNIVERISITY OR PH.D. DEGREE COURSE]

10) [THIS POINT PERTAINS ANY CURRENT APPOINTMENT YOU HAVE (E.G. NON-FACULTY TEACHING ASSISTANT). IF YOU DON'T HAVE ONE, REMOVE THIS POINT ENTIRELY; OTHERWISE, FILL IN WITH THE DETAILS OF THE CONTRACT]

di svolgere la seguente attività lavorativa presso __SPECIFY THE NAME OF YOUR EMPLOYER, IF IT IS A PUBLIC OR PRIVATE INSTITUTION, THE TYPE OF POSITION YOU HAVE__;

11) di non essere dipendente di ruolo dei soggetti di cui all'art. 22, comma 1, della L. 240/2010; [HERE YOU DECLARE THAT YOU DO NOT HAVE A PERMANENT POSITION IN ANY UNIVERSITY OR RESEARCH INSTITUTION IN ITALY]

12) di non avere un grado di parentela o di affinità, fino al quarto grado compreso, con un professore appartenente al Dipartimento di Matematica Guido Castelnuovo, ovvero con il Rettore, il Direttore Generale o un componente del Consiglio di Amministrazione de La Sapienza – Università di Roma; [HERE YOU DECLARE THAT YOU ARE NOT A CLOSE RELATIVE TO PROFESSORS OF THE MATHEMATICS DEPARTMENT, NOR TO THE RECTOR, GENERAL DIRECTOR OR MEMBERS OF THE BOARD OF ADMINISTRATION OF SAPIENZA]

13) di non trovarsi in situazione, anche potenziale, di conflitto d'interesse con La Sapienza – Università di Roma; [HERE YOU DECLARE THAT YOU DON'T HAVE ANY CONFLICT OF INTEREST WITH SAPIENZA]

14) di non cumulare con un reddito imponibile personale annuo lordo di lavoro dipendente, come definito dall'art. 49 del TUIR – titolo I, capo IV, superiore a € 16.000,00; [HERE YOU DECLARE THAT YOU DON'T HAVE ANY OTHER JOB WHICH GRANTS YOU A TAXABLE INCOME OF OVER 16.000€]

15) di eleggere il proprio domicilio in __CITY, FULL ADDRESS AND ZIP CODE OF WHERE YOU LIVE__ tel. __PHONE NUMBER (PLEASE ADD INTERNATIONAL PREFIX, TYPICALLY +xx OR 00xx)__ e di impegnarsi a comunicare tempestivamente eventuali variazioni; [IN CASE THESE INFORMATION CHANGE WHILE THE PROCEDURE IS OPEN, YOU SHOULD CONTACT rosanna.briscese@uniroma1.it WITH THE UPDATED INFORMATION]

16) di voler ricevere ogni comunicazione, ivi compresa la convocazione per il colloquio, al seguente indirizzo di posta elettronica personale, senza che il Dipartimento di Matematica abbia altro obbligo di avviso: __YOUR EMAIL ADDRESS, WHERE YOU WILL RECEIVE ALL COMMUNICATIONS PERTAINING THE PROCEDURE__;

17) di essere informato, ai sensi e per gli effetti del Regolamento generale sulla protezione dei dati (GDPR) UE 2016/679 e della normativa nazionale vigente di cui al D. Lgs. n. 196/2003 che i dati personali e giudiziari raccolti saranno trattati, anche con strumenti informatizzati e/o automatizzati, nell'ambito della procedura in oggetto e di prestare il consenso al trattamento dei dati per le finalità e per gli adempimenti connessi alla presente procedura e indicati nell'apposita informativa allegata al bando AR. n. 1/2021, ai sensi degli artt. 12, 13 e 14 del GDPR 2016/679; [HERE YOU DECLARE YOU READ AND GIVE CONSENT TO THE PRIVACY DECLARATION]

I candidati portatori di handicap, ai sensi della Legge 5 febbraio 1992, n. 104 e successive modifiche, dovranno fare esplicita richiesta, in relazione al proprio handicap, riguardo l'ausilio necessario per poter sostenere il colloquio. [IN CASE YOU HAVE ANY PHYSICAL CONDITION AND NEED AIDS FOR THE INTERVIEW, YOU SHOULD LET US KNOW BY CONTACTING THE COMMITTEE, WHEN IT IS APPOINTED, AND THE ADMINISTRATIVE RESPONSIBLE FOR THE PROCEDURE: rosanna.briscese@uniroma1.it]

Il sottoscritto allega alla presente domanda, in formato pdf: [THE FOLLOWING IS THE LIST OF FURTHER ATTACHMENTS: ALL THESE DOCUMENTS, INCLUDING THIS APPLICATION, SHOULD BE PRODUCED IN PDF FORMAT]

1. dichiarazione sostitutiva di certificazione ai sensi dell'art. 46 del D.P.R. 28 dicembre 2000, n. 445 del diploma di laurea con l'indicazione delle votazioni riportate nei singoli esami di profitto e nell'esame di laurea, dell'Università che lo ha rilasciato e dell'anno di conseguimento (**Allegato C**);

2. dichiarazione sostitutiva di certificazione ai sensi dell'art. 46 del D.P.R. 28 dicembre 2000, n. 445 dell'eventuale titolo di dottore di ricerca o titolo equivalente anche conseguito all'estero (**Allegato C**);

3. dichiarazione sostitutiva di certificazione o dell'atto di notorietà ai sensi degli artt. 46 e 47 del D.P.R. 28 dicembre 2000, n. 445 dei titoli che si ritengono utili ai fini del concorso (diplomi di specializzazione, attestati di frequenza di corsi di perfezionamento post-laurea conseguiti in Italia o all'Estero, soggiorni di studio all'estero, borse di studio o incarichi di ricerca sia in Italia che all'Estero, tesi di laurea o di dottorato, ecc.) (**Allegato C**);

[YOU HAVE TO ATTACH "ANNEX C", WHICH LISTS: (1.) YOUR MASTER DEGREE COMPLETE WITH A LIST OF EXAMS, INCLUDING THE FINAL EXAM, AND GRADES YOU GOT; (2.) YOUR PH.D. DEGREE OR EQUIVALENT TITLE, IF APPLICABLE; (3.) ANY TITLES AND QUALIFICATIONS YOU CAN CERTIFY, SEE POINT 4) ABOVE]

4. curriculum della propria attività scientifica e professionale; [YOU HAVE TO ATTACH A C.V. WITH A DESCRIPTION OF YOUR SCIENTIFIC AND PROFESSIONAL ACTIVITIES]

5. eventuali pubblicazioni scientifiche (**Allegato D**); [YOU SHOULD ATTACH PUBLICATIONS YOU (CO-)AUTHORED, IF YOU HAVE ANY, THAT YOU BELIEVE ARE RELEVANT FOR THE POSITION. IN "ANNEX D", YOU WILL DECLARE THAT THE LIST OF TITLES AND QUALIFICATIONS YOU PRESENTED IN "ANNEX C", TOGETHER WITH THE COPIES/PDFs OF THE PUBLICATIONS YOU ARE ATTACHING (IF ANY), ARE UNALTERED COPIES OF THE ORIGINALS.]

6. copia di un documento di identità in corso di validità e del codice fiscale o tessera sanitaria (fronte/retro) datati e firmati. [YOU MUST ATTACH A COPY OF AN IDENTITY DOCUMENT (E.G. I.D. CARD, PASSPORT…), WHERE YOU SHOULD ALSO PUT THE DATE AND YOUR SIGNATURE. IF THIS DOCUMENT IS MISSING, YOU WILL BE EXCLUDED FROM THE PROCEDURE! IF YOU HAVE IT, YOU SHOULD ATTACH ALSO A COPY (BACK & FRONT) OF YOUR ITALIAN "CODICE FISCALE" OR "TESSERA SANITARIA" – AGAIN WITH DATE AND SIGNATURE]

Il sottoscritto autorizza il trattamento dei propri dati personali inseriti nel presente modulo e di quelli presenti nel CV ai sensi del GDPR (Regolamento UE 2016/679) e della normativa nazionale vigente. [HERE YOU DECLARE YOU READ AND GIVE CONSENT TO THE PRIVACY DECLARATION]

Luogo e data PLACE AND DATE Firma YOUR SIGNATURE

(non soggetta ad autentica ai sensi dell'art. 39 del D.P.R. 28.12.2000, n. 445).

ALLEGATO B

DICHIARAZIONE SOSTITUTIVA DI CERTIFICAZIONE
(Resa ai sensi degli Artt. 46 e 47 del D.P.R. 28 dicembre 2000 n. 445)

Il/La sottoscritto/a [KEEP "Il sottoscritto" IF MALE, "La sottoscritta" IF FEMALE] __NAME SURNAME__
Nato/a [KEEP "Nato" IF MALE, "Nata" IF FEMALE] a __PLACE OF BIRTH__ prov. di __PROVINCE, REGION… OF PLACE OF BIRTH, IF APPLICABLE__ in data __DATE OF BIRTH__
e residente a __CITY WHERE YOU LIVE__ (Prov. __PROVINCE, REGION… OF CITY WHERE YOU LIVE, IF APPLICABLE__) in __FULL ADDRESS__ (Cap. __ZIP CODE__)
ai sensi degli artt. 46 e 47 del DPR 28.12.2000 n. 445, consapevole delle sanzioni penali, nel caso di dichiarazioni non veritiere e falsità negli atti, richiamate dall'art. 76 D.P.R. 445 del 28.12.2000, dichiara sotto la propria responsabilità:

DICHIARA

- [FILL THIS IN ONLY IF YOU ARE CURRENTLY ENROLLED IN A PH.D. PROGRAMME WITHOUT FELLOWSHIP, OTHERWISE REMOVE THE POINT ENTIRELY] di usufruire del dottorato di ricerca senza borsa di studio dal __STARTING DATE OF YOUR PH.D. PROGRAMME__ al __END DATE OF YOUR PH.D. PROGRAMME__ (totale mesi __TOTAL DURATION OF THE PROGRAMME, IN MONTHS__) presso __NAME OF THE UNIVERSITY / INSTITUTION HOSTING THE PROGRAMME__
- [FILL THIS IN ONLY IF YOU PREVIOUSLY HAD ANY "ASSEGNI DI RICERCA" IN AN ITALIAN UNIVERSITY/INSTITUTION, OTHERWISE REMOVE THIS POINT ENTIRELY AND INCLUDE THE NEXT ONE] di essere stato titolare di assegno di ricerca, ai sensi dell'art. 22 della legge 30 dicembre 2010, n. 240:

dal __STARTING DATE OF YOUR CONTRACT__ al __END DATE OF YOUR CONTRACT__ (totale mesi __TOTAL DURATION OF THE CONTRACT, IN MONTHS__) presso __NAME OF THE UNIVERSITY / INSTITUTION HOSTING THE PROGRAMME__
[REPEAT THE LINE OF ANY "ASSEGNO DI RICERCA" YOU HAD]

- [KEEP THIS ONLY IF YOU HAVE NEVER HAD ANY PREVIOUS "ASSEGNO DI RICERCA"] di non essere stato mai titolare di assegno di ricerca, ai sensi dell'art. 22 della legge 30 dicembre 2010, n. 240.
- [FILL THIS IN ONLY IF YOU PREVIOUSLY HAD ANY "RICERCATORE A TEMPO DETERMINATO" CONTRACT IN AN ITALIAN UNIVERSITY/INSTITUTION, OTHERWISE

REMOVE THIS POINT ENTIRELY AND INCLUDE THE NEXT ONE] di essere stato titolare di contratto di ricercatore a tempo determinato, ai sensi dell'art. 24 della legge 30 dicembre 2010, n. 240: dal __STARTING DATE OF YOUR CONTRACT__ al __END DATE OF YOUR CONTRACT__ (totale mesi __TOTAL DURATION OF THE CONTRACT, IN MONTHS__) presso __NAME OF THE UNIVERSITY / INSTITUTION HOSTING THE PROGRAMME__

[REPEAT THE LINE OF ANY "RICERCATORE A TEMPO DETERMINATO" CONTRACT YOU HAD]

- o [KEEP THIS ONLY IF YOU HAVE NEVER HAD ANY PREVIOUS "RICERCATORE A TEMPO DETERMINATO" CONTRACT] di non essere mai stato titolare di contratto di ricercatore a tempo determinato, ai sensi dell'art. 24 della legge 30 dicembre 2010, n. 240.

Indicare eventuali periodi trascorsi in aspettativa per maternità o per motivi di salute secondo la normativa vigente: __INDICATE ANY PERIOD YOU SPENT IN LEAVE OF ABSENCE DUE TO MATERNITY/PATERNITY OR HEALTH-RELATED ISSUES (IF APPLICABLE)__

..l.. sottoscritt.. [COMPLETE WITH "Il sottoscritto" IF MALE, "La sottoscritta" IF FEMALE] dichiara, altresì, di essere informato, ai sensi e per gli effetti di cui al D. Lgs. n. 196/2003 e al Regolamento UE n. 679/2016, che i dati personali raccolti saranno trattati, anche con strumenti informatici, esclusivamente nell'ambito del procedimento per il quale la presente dichiarazione viene resa. Il sottoscritto esprime pertanto il proprio consenso affinché i dati personali forniti possano essere trattati nel rispetto del Decreto legislativo 30.6.2003, n. 196 e del Regolamento UE n. 679/2016 per gli adempimenti connessi alla presente procedura. [HERE YOU DECLARE YOU READ AND GIVE CONSENT TO THE PRIVACY DECLARATION]

Luogo e data __PLACE AND DATE__ Firma __YOUR SIGNATURE__

ALLEGATO C

AUTOCERTIFICAZIONE
Resa ai sensi dell'art. 46 del D.P.R. 28.12.2000 n.445
(da allegare alla domanda secondo quanto previsto dall'art. 5 del bando)

Il/la sottoscritto/a [KEEP "Il sottoscritto" IF MALE, "La sottoscritta" IF FEMALE] Dott. __NAME SURNAME__

nato/a [KEEP "nato" IF MALE, "nata" IF FEMALE] a __PLACE OF BIRTH__

il __DATE OF BIRTH__

DICHIARA

Sotto la propria responsabilità, consapevole che in caso di dichiarazioni false o mendaci, incorrerà nelle sanzioni penali richiamate dall'art. 76 del D.P.R. 28.12.2000 n. 445 e decadrà immediatamente dalla eventuale attribuzione dell'assegno di ricerca:

1) di essere in possesso del diploma di laurea in __NAME OF YOUR MASTER DEGREE (E.G. MATHEMATICS, PHYSICS…)__

conseguito il __DATE WHEN YOU WERE AWARDED YOUR MASTER DEGREE__ con la votazione di __FINAL GRADE OF YOUR MASTER DEGREE__

presso __UNIVERSITY / INSTITUTION WHICH AWARDED YOUR MASTER DEGREE__

con votazione per i singoli esami di profitto

HERE YOU SHOULD LIST ALL THE NAMES OF THE EXAMS YOU PASSED IN YOUR MASTER DEGREE, TOGETHER WITH THEIR GRADES

2) [FILL THIS IN IF YOU HAVE A PH.D. DEGREE OR EQUIVALENT TITLE, OTHERWISE REMOVE THIS POINT ENTIRELY] di essere in possesso del titolo di Dottore di ricerca in __NAME OF YOUR PH.D. DEGREE (E.G. MATHEMATICS, PHYSICS…)__

conseguito il __DATE WHEN YOU WERE AWARDED YOUR PH.D. DEGREE__ presso __UNIVERSITY / INSTITUTION WHICH AWARDED YOUR PH.D. DEGREE__

3) [FILL THIS IN IF YOU HAVE HELD ANY RESEARCH POSITION (E.G. POST-GRADUATE FELLOWSHIP, POST-DOCS, VISITING POSITIONS…), OTHERWISE REMOVE THIS POINT ENTIRELY] di avere svolto attività di ricerca

presso __DETAILS OF YOUR RESEARCH POSITION (HOST UNIVERSITY / INSTITUTION , NAME AND TYPE OF POSITION, START- AND END-DATES OF YOUR CONTRACT); REPEAT FOR ALL POSITIONS OF THIS TYPE__

4) di essere in possesso dei seguenti titoli che si ritengono utili ai fini della selezione:

HERE YOU SHOULD LIST ALL "CERTIFIABLE" TITLES AND QUALIFICATIONS YOU MENTIONED IN YOUR APPLICATION, "ANNEX A", UNDER POINT 4) – MAY HAVE BECOME POINT 3) IF YOU DON'T HAVE A PH.D. DEGREE OR EQUIVALENT

Luogo e data PLACE AND DATE

IL/LA [KEEP "IL" IF MALE, "LA" IF FEMALE] DICHIARANTE YOUR SIGNATURE

ALLEGATO D

DICHIARAZIONE SOSTITUTIVA DELL'ATTO DI NOTORIETA'
(artt. 19 – 47 del D.P.R. 28.12.2000 n. 445)

Il/La sottoscritto/a [KEEP "Il sottoscritto" IF MALE, "La sottoscritta" IF FEMALE] __NAME SURNAME__
nato/a [KEEP "Nato" IF MALE, "Nata" IF FEMALE] a __PLACE OF BIRTH__ (Provincia __PROVINCE, REGION… OF PLACE OF BIRTH, IF APPLICABLE__) il __DATE OF BIRTH__
codice fiscale __ITALIAN "CODICE FISCALE", IF APPLICABLE__
attualmente residente a __CITY WHERE YOU LIVE__ (Provincia __PROVINCE, REGION… OF CITY WHERE YOU LIVE, IF APPLICABLE__)
__FULL ADDRESS__, cap __ZIP CODE__, telefono __PHONE NUMBER__
consapevole della responsabilità penale prevista dall'art. 76 del D.P.R. 445/2000, per le ipotesi di falsità in atti e dichiarazioni mendaci ivi indicate

DICHIARA

che i titoli e le pubblicazioni di seguito riportati, presentati per partecipare alla selezione pubblica per titoli e colloquio di cui al Bando n. 10/2023 del 20.12.2023 per il conferimento di un Assegno di Ricerca sono conformi agli originali:

HERE YOU SHOULD LIST ALL THE CERTIFICATES FOR THE TITLES AND QUALIFICATIONS YOU MENTIONED IN YOUR APPLICATION, "ANNEX A", UNDER POINT 4) – MAY HAVE BECOME POINT 3) IF YOU DON'T HAVE A PH.D. DEGREE OR EQUIVALENT – AND IN THE PREVIOUS "ANNEX C".
IF YOU ARE ATTACHING ALSO PUBLICATIONS, YOU SHOULD MENTION THEM HERE AS WELL IN THE LIST: WITH JOURNAL REFERENCE, IF YOU HAVE IT; WITH MENTION TO THE ACCEPTANCE LETTER, WHICH YOU SHOULD ATTACH AND MENTION HERE, FOR PUBLICATIONS WHICH ARE ACCEPTED BY SOME JOURNAL BUT NOT YET PUBLISHED; WITH THE ONLINE DEPOSITORY NUMBER (E.G. arXiv PREPRINT NUMBER), FOR PREPRINTS AVAILABLE ONLINE.

Dichiara inoltre di essere informato/a [KEEP "informato" IF MALE, "informata" IF FEMALE], ai sensi e per gli effetti del Regolamento europeo n. 679/2016, che i dati personali saranno trattati, con strumenti cartacei e con strumenti informatici, esclusivamente nell'ambito del procedimento per il quale la seguente dichiarazione viene resa. [HERE YOU DECLARE YOU READ AND GIVE CONSENT TO THE PRIVACY DECLARATION]

Luogo e data __PLACE AND DATE__

IL/LA [KEEP "IL" IF MALE, "LA" IF FEMALE] DICHIARANTE __YOUR SIGNATURE__