



Project
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**ENPI
CBCMED**
CROSS-BORDER COOPERATION
IN THE MEDITERRANEAN



**COMPARATIVE PUBLIC PROCEDURE BASED ON QUALIFICATIONS, FOR THE AWARDING OF
TEACHING POSITIONS
WITHIN THE STRATEGIC PROJECT
“S&T MED Sustainability and Tourism in the Mediterranean”
P.O. ENPI CBCMED 2007/2013 (CUP C38B12000070003)
TRAINING SESSION IN ITALY AND TUNISIA**

**To the kind attention of:
University for Foreigners “Dante Alighieri” of Reggio Calabria
Via del Torrione 95 – 89125 Reggio Calabria (RC)**

DECLARATION FORM

| | | | |
|-----------------|-------|-------|----------------|
| The undersigned | _____ | | |
| born in | _____ | Prov. | _____ on _____ |
| tax number | _____ | | |
| resident in | _____ | Prov. | _____ |
| address | _____ | n. | _____ |
| tel. or mobile | _____ | | |
| e-mail: | _____ | | |

DECLARES

- a) to be/not to be an employee of the University for Foreigners “Dante Alighieri” of Reggio Calabria;
- b) never having been deprived nor laid off from Public Administration due to persistent poor performance;
- c) never having been deprived from a State employment, according to Article 127 (d), of the D.P.R.I 0.01.1957, n. 3;
- d) not have any criminal convictions that, under to current legislation, precludes the establishment of a working relationship with the Public Administration;
- e) not to have any family relationship until the 4° inclusive degree of kinship with a professor of the educational institution in question, or with the Rector, the General Manager or a member of the University Board of Directors.

The undersigned _____ authorizes the University for Foreigners “Dante Alighieri” of Reggio Calabria to the processing of personal data in compliance with the D.L.vo 196/2003 only for institutional purposes and permitted by law.

Date and place _____ Signature _____

