To the attention of:

EDMUND MACH FOUNDATION

Directorate General

Organization and Human Resources Division

Via E. Mach 1, San Michele all'Adige, 38098 Trento, Italy

SUBJECT: Application in response to the Recruitment Announcement of the Edmund Mach Foundation, pursuant to Article 14, paragraph 6, of the Foundation Regulation for the selection of human resources (declarations by the applicant pursuant to Articles 46 and 47 of Decree of the President of the Republic 445/2000.)

I, the undersigned (full name)	
born on (date dd/mm/yyyy)	
in (city, municipality)	
of the Italian province or non-Italian State	
national tax code	
citizenship	
registered as a resident in	
street address	
postal code, city	
currently domiciled at	
street address	
postal code, city	
telephone	
mobile telephone	
email	
certified email (PEC)	

pursuant to Articles 46 and 47 of Presidential Decree 445/2000, in submitting my application, under my own personal responsibility, aware that in the event of false declarations the criminal sanctions provided for by law will be applicable, pursuant to Article 76 of the same Presidential Decree 445/2000

I DECLARE:

(declarations are made by <u>ticking</u> the relevant boxes and, where required, completing the declarations requested; comments in Italic letters are not included in the declarations) for purposes of application in response to the Recruitment Announcement:

N. 1 (one) temporary position for 27 months* as Fourth level researcher (R4) in the field of sensory and consumer sciences (321_CRI_PML)

DECLARATION OF POSSESSION OF ADMISSION REQUIREMENTS	
that I possess all of the requirements indicated in the Announcement, under penalty of exclusion	ι;

Thesis abstract

(to compile only in the case of higher qualification)

A 1 1	1	ngsor qua					
Advanced education							
graduation	_						
certificate in							
Awarded on (d	late						
dd/mm/yyyy)							
By the instituti	ion _						
With the overa	.11						
grade	_						
Thesis title (if available)	_						
T		Post-1	lst-cycle certific	ate	1st level Mas	ster	2nd level Master
Туре		Diplo	ma in a specialis	sation	☐ PhD		

							esponding to the Commo
							A2, B1, B2, C1, C2), which glish and Italian (minimum
level corresp	-	•	Jusion, and m	parm	cuiai tiiat i Kiiov	V 1211;	gnsii and Itanan (iimiinu
Languag		Level Certificate (if held) and o			and date of exam		
English	English						
Italian							
	D	ECLA	RATION OF (ЭТНЕ	ER CERTIFICA	TION	NS
In particular, I po			ing additional ce	ertifica	tions relevant to the	ne pre	e-selection of candidates unde
_							
			nsory and con arch institutes			(inc	luding doctorate) in highl
indicate th			Research	n instit	cutions or		Sector
				company	(ser	nsory and consumer sciences)	
(dd/mm/yyyy)							
							
			-		<u>-</u>		
					<u>-</u>		
						<u> </u>	

☐ Work experience in teaching:						
indicate the period		School or University	Teaching subject			
from (dd/mm/yyyy)	to (dd/mm/yyyy)	school of Chiversity	(food science, chemistry, etc.)			

☐ Internship in sensory and consumer science field:

indicate th	ne period	Research institutions or	Sector	
from (dd/mm/yyyy)	to (dd/mm/yyyy)	universities or company	(sensory and consumer sciences)	

Publications in international journals with peer review in the sensory and consumer science sector:

Author/s	Journal	Publication title

Oral presentations at international c International conference title	Oral presentation	
	•	
		
_	***	
Specialized training in the sensory, c n training courses:	consumer science and food sector de	ocumented by particip
Course title	Type and sector of the course	Total hours

DECLARATION OF GENERAL REQUIREMENTS	
(tick and complete ONE of the following declarations)	
☐ I am an Italian citizen;	
or	
I am a citizen of a European Union or other State (name of the State):and	
I enjoy full civil and political rights in the country of origin or nationality (or else indicate the reasons for enjoying full rights);	noi
with the exception of Italian citizenship, I possess all of the same requirements as for citizens of Republic;	the

(tick and complete ONE of the following declarations)	
☐ I have NOT been convicted, nor have I applied for a penalty at my own request (plea bargaining), who has been confirmed by the courts as an enforceable conviction;	ich
I HAVE been convicted or have applied for the following convictions or penalties (plea bargaining) wh have been confirmed by the courts as enforceable, and/or have been the subject of the following rulin concerning the application of security or prevention measures, civil decisions or administrative measurementered in the judicial record pursuant to current legislation (including those for which the court has grant non-registration in the judicial record and/or conditional suspension of the penalty):	ngs
(indicate the complete list of the above convictions or measures, and for each one indicate the responsible court and its seat)	
1);	
2); 3);	

(tick and complete ONE of the following declarations)	
☐ I have NOT been convicted nor applied for (plea bargaining) a conviction or penalty, that HAS NOT YEAR BEEN CONFIRMED AS ENFORCEABLE, for the offences referred to in Book 2, Title II, Chapter I the Italian Criminal Code ("Offences committed by public officials against the Public Administration");	l of
I HAVE been convicted or have applied for the following convictions or penalties (plea bargaining WHICH HAVE NOT YET BEEN CONFIRMED AS ENFORCEABLE, for the offences referred to Chapter I, Title II of the Second Book of the Penal Code ("Offences committed by Public Officials again the Public Administration"), and/or have been the subject of the following rulings concerning application of security and prevention measures, civil decisions or administrative measures entered in judicial record pursuant to current legislation (including those for which the court has granted not registration in the judicial record and/or conditional suspension of the penalty):	inst the the
(indicate the complete list of the above convictions or measures, and for each indicate the responsible court and its seat)	
1); 2);	
3) ;	

(tick and complete ONE of the following declarations)	
☐ I am NOT aware of any pending criminal proceedings against me;	

☐ I AM AWARE of the following criminal proceedings pending against me:

or

	Identification of the	
	judicial proceeding	
	Type of offence	
	Judicial body responsible	
	for the proceedings	

Ita	lian citizens only - tick ONE of the	following declarations)
	I AM registered in the electe	oral roll for the Municipality of;
r	_ 0	1 7
	☐ I am NOT registered, o	r I have been deleted from the electoral roll, for the following reasons:
		;

tick	k ONE of the following declarations)	
	_	and deplaced discovalified on terminated from ampleyment for having been
		sed, declared disqualified or terminated from employment for having been ction of false documents or documents that are invalid with no possibility of
	remedy, or for having carried	d out activities incompatible with the employment relationship with the Public
	Administration or with entit	ies governed by private law but under public control;
r		
		eclared disqualified or terminated from employment for having been recruited
		lse documents or documents that are invalid with no possible remedy invalidity activities incompatible with the employment relationship with the Public
		ies governed by private law but under public control;

tick	k and complete ONE of the following	declarations)
	1 , ,	have NOT exercised authoritative or negotiating powers over the Edmund
		3, paragraph 16 ter of Legislative decree 165/2001);
r		
	Over the past three years, I	HAVE exercised authoritative or negotiating powers over the Edmund Mach
	` *	graph 16 ter of Legislative decree 165/2001):
		or companies where you have held positions with authoritative or negotiating powers over the
	Edmund Mach Foundation) 1)	·····;
	2)	
	3)	;

tick	k and complete ONE of the following	declarations)
	☐ I am NOT aware any relation	onships of marriage, cohabitation or family relationship up to the fourth degree
	with employees, ongoing cor	nsultants, directors or members of the supervisory bodies of the Edmund Mach
	Foundation;	
r		
		s) of marriage, cohabitation or family relationship up to the fourth degree with
	employees, ongoing consult Foundation:	ants, directors or members of the supervisory bodies of the Edmund Mach
		, family and if known, date of birth)
	- · · · ·	; jamuy ana y known, aase of ourn);
	2)	;
	3)	

I am aware that if there exists any case, during the last 5 years prior to my possible recruitment, that I have been dismissed for justified subjective reason or just cause, or have had an employment relationship terminated in application of Article 32 quinques of the Italian Criminal Code, or because of failure to pass the probationary period for a relationship of indefinite duration and requiring the same qualifications as for this current recruitment, then the existence of such case entails the impossibility of being recruited. I therefore declare that I am not in this situation;						

☐ I am in full compliance	with any mi	ilitary service	e obligations (a	i.e. fulfilled/ not	subject to milita	ry service);

☐ I am available to travel	to any of th	e Foundation	n's offices in t	he province v	where I will be	employed.
		FURTHE	R DECLARA	TIONS		
☐ I HOLD one of the fo	llowing driv	ing licenses	(in the case of he	olding a license,	tick the appropri	iate classification):
					TI T	
Class	\square A	В	С	☐ C1	D	□ D1

□ I		.1		1	<i>c</i> · , ·	<i>1 11 · 1</i>
I am enrolled in a professional/technical order(s):	profession	ai associati	ion (compile v	elow in the ca	ise of registry ii	n any legally recognisea
Professional/techni						
cal order						
State/region/provin ce						
Date of registration						
(dd/mm/yyyy)						
Registration no.						

I AM NOT a retired en	mployee of	a public adm	inistration or	private comp	anv:	
_	. ,	1			a11y,	
☐ I AM a retired employe	е от а риоп	c administrat	-	company,		

I BELONG to one of the categories referred to in Law no. 68/99 – e.g. persons with disabilities (ascertained disability at least 46%), persons disabled due to workplace incidents (ascertained disability at least 34%), persons disabled due to incidents in war or civil service, persons with sight or hearing disability;						

I BELONG to one the died due to workplace incide children or spouses of person arriving from foreign States;	nts, war or civ. es recognised a	il service, or as	a result of the ag	gravation of a d	isability resulting	from such circumstances;

I am aware that on the meet all the requiremen I must promptly inform	ts laid out in	n the Recruit	ment Annour	ncement. I the	erefore declare	that I am aware that
☐ I am aware of and hav						

us/Documents-of-Reference/Regulations-for-the-recruitment-of-human-resources;

☐ I am aware that the Edmund Mach Foundation has implemented an Organisation, Management and Control Model pursuant to Legislative Decree no. 231/2001 and I therefore undertake to respect the general and specific principles contained therein;

I am aware that the Edmund Mach Foundation has adopted a Code of Ethics and Conduct, and I therefore undertake to respect the Code and not to behave in any way that induces the Edmund Mach Foundation, its directors, managers, employees or collaborators to violate the principles contained therein;

☐ In submitting this application, I have read the information on the processing of personal data, in accordance with EU Regulation 2016/679 (GDPR), as set out in the Privacy Policy referred to in the webpage:
https://www.fmach.it/eng/General-Services/Work-with-us/Information/Information-about-the-processing-of-personal-data

I agree that the Edmund Mach Foundation may carry out verifications of the declarations made herein; and, if requested by the foundation, I agree to provide further documentation proving the facts, conditions or personal qualities which are not demonstrated by the official certificates and documents that I provide in accompaniment to these current declarations.

☐ I am aware that these declarations must be accompanied by:
a) A copy of a valid identity document b) My curriculum vitae.

Place and date of signing
Signature in original ¹

¹Pursuant to Article 38(2) of Presidential Decree 445/2000, any declarations in lieu of affidavits/certificates must be signed by the person concerned and submitted together with a copy (not notarised or official) of their valid identity document.