**SUBSTITUTE DECLARATION OF NOTARIAL DEED**

(Pursuant to Art. 47 of the Italian Presidential Decree no. 445 of 28th December 2000)

Al Magnifico Rettore / To the Rector

**Università degli Studi di Brescia, Italy**

PEC: [ammcentr@cert.unibs.it](mailto:ammcentr@cert.unibs.it)

**WAIVE TO ENROL IN THE PhD PROGRAMME**

**OR**

**TO BENEFIT THE PhD SCHOLARSHIP BUT PURSUING HIS/HER STUDIES**

## I (surname / name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth -\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**resident in** (address) City/Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address/Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Enrolled at the 1st A.Y. 2023/2024**

**OR**

**Eligible candidate assigned a post at the PhD Programme, XXXIX cycle, in**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DECLARE (*make a choice*)**

□ **to waive the scholarship, if beneficiary, and enrol in any case or if already enrolled to continue his/her activity in the PhD Programme in**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ **to waive his/her enrolment, in case his/her enrolment has been completed or** **not to enrol at all in the PhD Programme in**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I am aware that this waiver is irreversible**.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place and date (**signature** – either by handwriting or electronic ex art. 24

of the Italian Legislative Decree n. 82/2005)

**Attaches**: copy of a valid ID/Passport copy