

**REQUEST OF EQUIVALENCE**

The undersigned.....(name and surname)  
born in .....(place of birth)  
on.....(date of birth)  
nationality .....  
requests to the selection committee for the Ph.D. course in  
..... XXXV cycle  
the recognition of equivalence to Laurea Magistrale of the following diploma:

Name of the master degree: \_\_\_\_\_

Awarding university: \_\_\_\_\_

Country: \_\_\_\_\_

Date of awarded diploma \_\_\_\_\_

Place and date,  
.....

Signature  
.....

**Declaration concerning the type of place  
(for candidates applying for Ph.D. courses offering reserved places only)**

**I, the undersigned**

Surname:			
Name:			
Gender:	M	F	
Birth:	Date		
	City		
	Country		
Residence:	City		
	Country		
	e-mail		

**DECLARE (Please tick one of the following)**

for ordinary places

for reserved places

Ph.D. course in :

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\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (PLACE) (DATE) (APPLICANT'S SIGNATURE)

**VIDEO CONFERENCE INTERVIEW FORM**

(art. 5 Call for applications)

**WARNING:** to be filled in as part of the application process where applicable and to be uploaded (through the procedure available at the link <http://portalestudente.unict.it/portalestudente/mapServlet> ) by the deadline for submitting the admission application with a copy of a valid ID document.

**I, the undersigned**

Surname:			
Name:			
Gender:	M	F	
Birth:	Date		
	City		
	Country		
Residence:	City		
	Country		
	e-mail		

**REQUEST**

to take the interview for the admission to the Ph.D. in \_\_\_\_\_

in video conference, as specified in the relevant attachment to the Admission Announcement and therefore provide the technical details required:

Video conference software:

\_\_\_\_\_

Personal account for the remote connection: \_\_\_\_\_

**I ALSO DECLARE**

to be aware of the provisions of the Admission Announcement, particularly art. 3 and. 5

\_\_\_\_\_ (PLACE)      \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (DATE)      \_\_\_\_\_ (APPLICANT'S SIGNATURE)

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