

ANNEX B

To the Head of the  
Department of Physics and Astronomy "Galileo Galilei"  
University of Padua

The undersigned .....  
(Surname) (Name)

Place of birth - Country ..... Town.....

Date of birth ..... Sex M F

Italian Taxpayer Identification Code .....

Contact information:

Mobile Phone .....

E-mail address (the same being used to submit the application) .....

**HEREBY REQUESTS**

to participate to the selection for the assignment of the Master's Thesis Award of the  
Department of Physics and Astronomy "Galileo Galilei", Fourth Edition

**HEREBY DECLARES**

under their own personal responsibility, pursuant to Articles 46 and 47 of D.P.R. 445/2000, aware  
of the criminal penalties provided for by Article 76 of D.P.R. 445/2000, for cases of false statements  
and false declarations:

• to have obtained the Master's Degree in .....  
at the University of Padua, on (date) .....  
Student identification number.....  
with a thesis entitled .....  
.....  
thesis supervisor.....  
thesis co-examiner.....  
final grade.....

• to commit to promptly communicate any possible change in the contact information indicated in  
the application form;

• to be aware of and to accept all the rules contained in the competition announcement.

Furthermore, the undersigned declares to be informed that, pursuant to Reg. 2016/679/EU  
(GDPR), the personal data collected will be processed, including through electronic tools,  
exclusively within the scope of the procedure for which this declaration is made.

**ATTACHES** the following documents:

1. copy of a valid personal identity document;
2. abstract of the master thesis, in English or Italian (max 2000 characters),
3. list of up to 5 significant points of the thesis with a brief description (max. 1500 characters) that  
highlights the innovative nature of the thesis work

Date .....

Signature.....