

To the Board of Professors

Research Doctorate in _____

(cycle _____)

**REQUEST FOR AUTHORISATION TO CARRY OUT PROFESSIONAL ACTIVITIES OUTSIDE
THE UNIVERSITY**

I, the undersigned _____ student no. _____,
tax code _____, enrolled for Academic Year 20____/20____ in the _____ year
of _____ the _____ research _____ doctorate _____ course _____ in
_____ (cycle _____) at the University
of Bergamo,

HEREBY ASK

pursuant to art. 17, comma 8 of the University Regulations on the subject of research doctorate courses, to
be authorized to carry out the following professional activity outside the doctorate in:

by _____ with the following type of
employment contract (*i.e.*: *open-ended, fixed-term, co.co.co. or project contract, etc.*):
_____ (*expiry date, if any*: _____) for no. _____ hours per
week for a total of no. _____ months, from _____ to _____.

I, the undersigned hereby declare, under my responsibility, that the information provided herein
corresponds to the truth, and to be fully aware of the penal sanctions resulting from false declarations
pursuant to art.76 of Italian Presidential Decree (D.P.R.) no. 445 of 28/12/2000.

I the undersigned agree to immediately notify to the University any changes occurred.

Bergamo, _____

SIGNATURE _____