PERSONAL DATA - METHOD OF PAYMENT

The undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in relation to the selection procedure, as per D.R. no. \_\_/20\_\_ of \_\_/\_\_/\_\_\_\_, with which the Call for Selection was issued for the award of no. \_\_ (\_\_\_) post-graduate scholarship for study and research activities in the context of the Research Project/Convention ‘\_\_\_\_\_\_\_\_\_\_\_\_’ - Scientific Responsible Prof.ssa/Prof.\_\_\_\_\_\_\_\_\_\_-, of which I was the winner.

**pursuant to Articles 46 and 47 of Presidential Decree no. 445/2000, I am aware that anyone who issues false declarations, draws up false documents or makes use of them shall be punished in accordance with the penal code and the special laws on the subject,**

**DECLARES**

**SECTION 1 - PERSONAL DATA**

|  |  |  |
| --- | --- | --- |
| Surname | | |
| First name | | |
| Place of birth | | Prov. |
| Date of birth | | |
| Address | | |
| City of residence | | Prov. |
| Postal code | Telephone numbers | |
| E-mail address | | |
| Tax code | | |

**SECTION 2 - FISCAL DOMICILE** *(to be indicated only if different from the registered address)*

|  |  |  |
| --- | --- | --- |
| City of residence | | |
| Address | | Prov. |
| Postal code | Telephone numbers and E-mail address | |

**SECTION 3 - METHODS OF PAYMENT**

|  |
| --- |
| The undersigned ... further requests that, canceling any analogous previous provision, the payment of any emolument paid to him/her by the Politecnico di Bari be made according to the following methods:   * credit on Bank Account n.…………………...………. ABI ……..….…. CAB ………….. CIN …....   IBAN ………………….………………….………………….…………………………………….…….………….  active at …………………………………………………………………………………………………………  made out in the name of the undersigned, or co-signed in the name of ………………………………………………   * credited to account Banco Posta n.…………………..……….……. ABI ……..….…. CAB ………….. CIN …....   IBAN ………………….………………….………………….…………………………………….…….………….  active at …………………………………………………………………………………………………………  made out in the name of the undersigned, or co-signed in the name of ………………………………………………   * commutation by bank draft to be sent to the following address, exonerating the Politecnico di Bari from any liability for any misdelivery of the same.   ……………………………………………………………………………………………………………………… |

*Finally, the undersigned declares to be informed, in accordance with the provisions of Legislative Decree no. 196 of June 30, 2003, on the protection of personal data and EU Regulation 2016/679 (GDPR) that the personal data provided will be processed in accordance with the laws and regulations in force and applicable, with automatic methods, including through computerized systems; to consent with this declaration, to the processing of personal data; to be aware of being able to exercise the rights provided for by the aforementioned regulatory provisions, including the right to obtain confirmation of the existence or otherwise of personal data concerning him/her, the updating, rectification or integration of the data as well as their cancellation, by written communication.*

Place and date Signature of the declarant

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