****

**PhD COURSE IN PSYCHOLOGICAL SCIENCES**

**Curriculum Vitae**

**The use of this form is mandatory for the evaluation of the candidate’s CV.**

**CV presented on other formats will not be considered.**

**PERSONAL DATA**

|  |  |
| --- | --- |
| Last Name |  |
| First Name |  |
| Birth place |  |
| Birth date |  |
| Nationality |  |

**MAILING ADDRESS**

|  |  |
| --- | --- |
| Address |  |
| Postal code |  |
| City |  |
| Country |  |
| E-mail |  |
| Phone/Mobile Phone |  |
| Skype-ID |  |
| Time zone: GMT +/- |  |

**Emergency Contact**

|  |  |
| --- | --- |
| *First name* |  |
| *Last name* |  |
| *Address* |  |
| *Postal code* |  |
| *City* |  |
| *Country* |  |
| *E-mail* |  |
| *Phone/Mobile Phone* |  |

**SECTION A: EDUCATION**

1. **ACADEMIC DEGREES**

**List all degrees in order of attainment**

BACHELOR’S DEGREE

|  |  |
| --- | --- |
| INSTITUTION AND LOCATION: |  |
| NAME OF QUALIFICATION AND TITLE: |  |
| STANDARD LENGTH OF THE PROGRAM (in years): |  |
| MAIN FIELD **(1)** : |  |
| ATTENDED FROM – TO: |  |
| DATE OF ATTAINMENT: |  |
| FINAL GRADE **(2 )** : |  |

MASTER’S DEGREE

|  |  |
| --- | --- |
| INSTITUTION AND LOCATION: |  |
| NAME OF QUALIFICATION AND TITLE: |  |
| STANDARD LENGTH OF THE PROGRAM (in years): |  |
| MAIN FIELD **(1)**: |  |
| ATTENDED FROM – TO: |  |
| DATE OF ATTAINMENT: |  |
| N° OF CLASSES/EXAMS PASSED AT THE MOMENT OF THE APPLICATION (over the total number of classes/exams in your program) **(3)** : |  |
| MEAN GRADE OBTAINED IN THE CLASSES/EXAMS PASSED (and reference range) **(4)**: |  |
| FINAL GRADE (if already obtained)**(2)**: |  |

OTHER DEGREES (for any other degree please fill-in the information in the following table. Should you have further degrees please make as many copies of this table as the number of degrees you want to list, and for each of them fill-in all the required information)

|  |  |
| --- | --- |
| INSTITUTION AND LOCATION: |  |
| NAME OF QUALIFICATION AND TITLE: |  |
| ATTENDED FROM – TO: |  |
| DATE OF ATTAINMENT: |  |
| STANDARD LENGTH OF THE PROGRAM (in years): |  |
| MAIN FIELD **(1)**: |  |
| FINAL GRADE **(2 )** : |  |

1. State the main field characterizing your undergraduate degree.
2. In the event that the qualification obtained abroad is expressed on a numeric scale, please use the following mathematical formula to convert your grade into the Italian numerical scale:

**Italian grade = [(Grade-MinGrade)\*44/(MaxGrade-MinGrade)] + 66**

where: *ItalianGrade*: equivalent Italian grade to be entered in the table.

*Grade*: your final mark

*MinGrade*: minimum final mark attainable at the University issuing the degree.

*MaxGrade*: maximum final mark attainable at the University issuing the degree.

In the event that the qualification obtained abroad is expressed on a non-numerical scale, please use the following conversion formula:

**Original grade Italian grade**

Excellent / First class Honours 110

Very good / Upper Second class 105

Good / Lower Second class 95

Satisfactory / Third class 85

Sufficient / Pass 75

1. E.g. 18 exams passed/20 exams in the program. IMPORTANT: Fill in this field also in the case the title is already attained. In such a case please insert the total number of classes/exams you passed.
2. Fill-in this field mandatorily, even if you have already graduated.
For Italian students: weighted mean of grades.

For foreign students: please specify the range (min-max) of the grades and, if a numerical scale cannot be used, please insert the modal value.

1. **MAJOR HONORS/AWARDS/GRANTS - honors, fellowships/scholarships (e.g. Erasmus), non-academic distinctions that testify your attitude to enroll in a doctoral program.**

**For more than one entry please make as many copies as needed of the table below and provide all the information requested.**

|  |  |
| --- | --- |
| NAME OF HONOR/AWARD/FELLOWSHIP/SCHOLARSHIP: |  |
| LENGTH OF THE FELLOWSHIP/SCHOLARSHIP: |  |
| AMOUNT OF THE FELLOWSHIP/SCHOLARSHIP:  |  |
| MAIN FIELD: |  |
| YEAR OF ATTAINMENT: |  |

|  |  |
| --- | --- |
| IN THE CASE OF FELLOWSHIP/SCHOLARSHIP: |  |

|  |  |
| --- | --- |
| BRIEF DESCRIPTION OF THE ACTIVITIES: |  |
| INSTITUTION WHERE THE ACTIVITIES HAVE BEEN CARRIED OUT: |  |
| NAME AND E-MAIL OF THE SUPERVISOR OF THE ACTIVITIES CARRIED OUT (IF ANY):  |  |

1. **LANGUAGE SKILLS**

**Standardized English language test information. For more than one entry please add new lines below the first one and fill in the required information.**

|  |  |  |
| --- | --- | --- |
| **NAME OF TEST** | **SCORE** | **DATE OF CERTIFICATION** |
|  |  |  |

**Indicate for each ability your competence in English language (poor, sufficient, good, very good, excellent)**

|  |  |  |  |
| --- | --- | --- | --- |
| **READING** | **WRITING** | **SPEAKING** | **LISTENING** |
|  |  |  |  |

**LIST any other language in which you have some competence (adding more lines if required)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **LANGUAGE** | **READING** | **WRITING** | **SPEAKING** | **CERTIFICATION****(if any)** |
|  |  |  |  |  |
|  |  |  |  |  |

**SECTION B: RESEARCH AND WORK EXPERIENCE**

* + - 1. **CURRENT POSITION**

**(describe your current position and the activities that you are currently carrying out for this position):**

|  |
| --- |
|  |

* + - 1. **RESEARCH EXPERIENCE (list any research experience you have completed or which you are currently involved in, in the case of multiple entries please make as many copies as needed of the table below). Do not modify the entries and make sure to provide all details in this order for each research experience.**

|  |  |
| --- | --- |
| ***Research title/topic/subject area*** |  |
| ***Describe how you were involved in the research (e.g., your tasks or responsibilities)*** |  |
| ***Institution that can provide certification of experience*** |  |
| ***Location*** |  |
| ***Name of the supervisor*** |  |
| ***Current e-mail of the supervisor*** |  |
| ***Start date – End date of the experience*** |  |
| ***Duration (number of months)*** |  |
| ***Type of experience: internship, research assistant, or other type of experience should be specified.******For Italian applicants tirocinio pre-laurea; post laurea, etc.*** |  |

* + - 1. **OTHER TRAINING EXPERIENCE (list any experience NOT RELATED TO RESEARCH you have completed or which you are currently involved in, in the case of multiple entries please make as many copies as needed of the table below). Do not modify the entries and make sure to provide all details in this order for each training experience.**

|  |  |
| --- | --- |
| ***Brief description of the type of training*** |  |
| ***How you were involved*** |  |
| ***Institution that can provide certification of experience*** |  |
| ***Location*** |  |
| ***Responsible person (if any) and his/her contact details*** |  |
| ***Start date – End date of the experience*** |  |
| ***Duration (number of months)*** |  |
| ***Type of experience:******For Italian applicants tirocinio pre-laurea; post laurea, etc.*** |  |

**SECTION C – THESIS AND PUBLICATIONS**

* + - 1. **Final Dissertation (if any) for the Bachelor degree**

|  |  |
| --- | --- |
| **Title:**  |  |
| **Name and email of the supervisor:**  |  |

* + - 1. **Master thesis**

|  |  |
| --- | --- |
| **Title:**  |  |
| **Name and email of the supervisor:**  |  |

* + - 1. **PUBLICATIONS**

|  |  |
| --- | --- |
| Number of papers published in peer-reviewed journal with Impact Factor:  |  |
| Number of papers published in peer-reviewed journal without Impact Factor:  |  |
| Number of papers published in conference proceedings:  |  |
| Number of manuscripts submitted or under review |  |

**Indicate the website where your publications are uploaded. If not available on the web, the publications can be attached to your application.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **N°** | **Authors** | **Year of Publication** | **TITLE of article/book (max 2.000 characters)** | **NAME of JOURNAL/CONFERENCE/BOOK-SERIES** | **Link to full text if available** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**List here any other publication**

|  |
| --- |
|  |

**SECTION D – LEAVES**

**List here any parental or medical leave**

|  |
| --- |
|  |

***Declarations***

*The undersigned, according to Art. 46 and 47 of the DPR (Decree of the President of the Republic n. 445 dated 28/12/2000) declares that he/she is aware of the liability and the penal sanctions stated in art. 75 and 76 of the aforementioned DPR for false affirmations and mendacious declarations that, when discovered in consequence of inspections carried out by the administration; will involve the loss of the gained benefits.*

*DECLARES*

* *That he/she knows and accepts all the rules stated in the call for the selection process.*
* *That all information contain in this application form are true*
* *That he/she complies with all requirements of the call*

*Data will be treated in accordance with art. 13 EU General Data Protection Regulation n. 679 dated 27.04.2016.*

I Accept? Yes No

Signature

………………………………….

**WATCH OUT**: PLEASE PRINT, SIGN AND UPLOAD THE FILLED FORM AS A PDF