ANILE & C.C.R. AWARD APPLICATION FORM

This application should be submitted to:

Associazione Angelo Marcello Anile Dipartimento di Matematica ed Informatica Viale Andrea Doria 6 95125 CATANIA

The deadline for applications is 5.00 pm on 30th June 2009. In addition, the application should be sent electronically (as a PDF file) to:

asso.ama@dmi.unict.it

Date:_____

Please ensure that all questions are answered and that all of the required attachments accompany this application form.

You may jeopardise your chances of success if you do not complete your application correctly.

YOUR PERSONAL DETAILS		
Last Name:	First Name:	
Institution:		
POSTAL ADDRESS	for correspondence regarding this application	
Street:	Number:	
Postal/Zip Code:	Town/City:	
Country:		
Telephone:	Cell Phone:	
E-mail Address:	Fax Number:	
YOUR CAREER DETAILS:		
Title of Dissertation		
Subject/Field of Research:		
Date of award of the degree of Doctor o	f Philosophy (dd/mm/yyyy):	
Education Institution/University:		
Supervisor:		

PRIVACY DECLARATION

I understand	that the ir	ıformation ı	requested ii	ı the	attached	application	ı form	will	be ι	ısed
solely for the	purposes	of assessing	g the award	for v	which I aı	m applying	•			

Signature:	Date:	

The Angelo Marcello Anile Association and the C.C.R. undertake to store your application in a secure place in the event that you are successful in winning an award or are selected as a reserve candidate for an award. The Angelo Marcello Anile Association and the C.C.R. undertake to destroy your application, to preserve its confidentiality, in the event that you are unsuccessful in winning an award and will return the copy of the thesis to you if so requested. Should you have reason to believe that information held about you in your application is incorrect, you have the right to access and correct that information.