



**THE GENERAL MANAGER  
VENETO ONCOLOGY INSTITUTE—I.R.C.C.S.  
Via Gattamelata n. 64  
35128 - PADUA**

..I...the undersigned .....born in.....  
on ..... resident in road ..... no.

town ..... Postal Code ....., telephone.....  
domiciled at..... in road ..... no..

town ..... Postal Code ....., e-mail.....

### **APPLIES**

to you to be able to access as an attendant

the department.....

for a period of .....

starting from the day ..... of the month of.....

For this purpose, pursuant to art. 46 of Italian Presidential Decree 28.12.2000, no. 445 and aware of the penal sanctions, in the case of untruthful declarations and false acts, referred to in art.76 of Italian Presidential Decree itself, the undersigned

### **DECLARES**

- to be in possession of the following qualification:
- obtained ..... the day.....

at the University of

.....reporting the marks .....,

- to have obtained the qualification to practice the profession at the University of  
..... in the session ..... of the year.....
- to be enrolled in the professional register of the ..... of the  
Province from ..... to ..... no. ....
- to be in possession of the diploma of Specialisation in.....

- obtained on ..... at the University of.....
- reporting the marks .....,

The undersigned also declares:

- to be aware that the authorisation to attend is for the sole purpose of acquiring professional knowledge and must not slow down or hinder the normal activity of the service;
- to have read and fully accepted the regulations for the staff attending the Veneto Oncology Institute;
- to exempt the Veneto Oncology Institute from any civil and criminal liability for willful misconduct and/or gross negligence that may derive from the attendance activity;

The undersigned also declares:

- not to be a full-time employee of a public or private organisation;
- to be an employee of a public or private organisation (attach authorisation from the relevant organisation).

Finally, the undersigned attaches:

- a copy of the regulations, dated and signed for acceptance
- a copy of the information, dated and signed for acceptance, pursuant to art.13 of Italian Legislative Decree 196/2003 (privacy code)
- a photocopy of the identity document

**Disclosure pursuant to art. 10 of the law no. 675/1996: the above data are prescribed by the provisions in force for the purposes of the procedure for which they are requested and will be used exclusively for this purpose.**

\_\_\_\_\_

*(place and date)*

\_\_\_\_\_

*Signature*

**NOTE: Pursuant to art. 38 of Italian Presidential Decree 28/12/2000, no. 445 this application must be signed by the data subject in the presence of the designated employee or signed and sent together with a photocopy, not authenticated of an identity document of the subscriber, to the competent office by fax, through a representative, or by post.**

Authorisation of the Unit Director

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Authorised

- Health Director .....  
.....
- Managing Director .....  
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- Scientific Director .....  
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