

II – PROFESSIONAL ACTIVITIES

(tick the appropriate box and fill in)

I don't carry out any professional activity

or

I carry out the following professional activities (specify the type and the denomination of the entity/company):


III – CONFLICT OF INTEREST

I am not related to or have any kinship up to the fourth degree included with:

- the teaching staff of the Dipartimento di ...;
- the Rector and the General Director of the Università del Piemonte Orientale;
- the Members of the Board of Directors of the Università del Piemonte Orientale,

and I undertake to provide notification should the above occur at a later date.

Date 08/07/2015

Signature 

COLLABORATORS

Declaration pursuant to art. 15 of Legislative Decree no. 33, 14th March 2013

Statement in lieu of a notarised document

I, the undersigned AHMAD REZA DJALALI
born in IRAN - TABRIZ
State _____
Date of birth 15-09-1971
Italian Tax code (only if possessed) DJLHDR71P15Z224X
resident in (country) Italy
City and postcode Novara - 28100
Address Via Andrea Costa 3
tel/mobile 3451644236
e-mail ahmadreza.djalali@med.uniupo.it
address (if different from residence) _____

as a Collaborator (ref. Contract no. of...../...../....., Prot. n.)

HEREBY DECLARE THAT:

pursuant to art. 15 of Legislative Decree no. 33, 14th March 2013, art. 15, c, 1, letter c),

I – APPOINTMENTS AND POSITIONS

(tick the appropriate box and fill in)

I don't have any permanent or temporary employment in private law entities regulated or funded by the Italian Government

or

I have the following employment in private law entities regulated or funded by the Italian Government:

