**APPLICATION FORM TO TAKE PART TO THE EXCAVATION/SURVEY CAMPAIGN AT XXXX**

**SCIENTIFIC DIRECTOR: XXXXXXXX** Overall period of activity: from xx/xx/xxxx to xx/xx/xxxx

NAME AND SURNAME:

DATE OF BIRTH:

ADDRESS:

EMAIL:

YEAR OF ENROLLMENT: XXXX ENROLLED TO THE 1ST / 2ND/3RD (delete as appropriate) YEAR OF THE DEGREE: (please specify the degree)

NO. OF MATRICULATION: 0000XXXXX

TURN PREFERENCE: (willing to take part to more than one turn)

PREFERENTIAL REQUIREMENTS (if specified in the call):

EXAMS ALREADY PASSED (AND MARK):

I declare:

1. to have the certificate of participation in the safety course organized by the University of Bologna (modules 1, 2 and 3, for a total of 12 hours), a copy of which is enclosed to the present form;

2. to have obtained the certificate of "suitability for the role of archaeologist" after a medical examination, valid until the end of the excavation campaign, a copy of which is enclosed to the present form.

Place date

Name Surname

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