



NOMINATION FORM FOR OPEN DUAL LECTURE SERIES		
GENERAL INFORMATION		
Applicant's nam	e:	
Date of birth:/		
City of birth:		
Country of birth:		
Address:		
(Street Address)		
(City)		
(State/Province)		
(Postal/Zip Code)		
CONTACTS		
Phone number:		
E-mail address:		
EXPERIENCE IN (select one area):		
☐ digital transformation;		
□ sustainability;		
□ societal challenges.		





SPECIFIC EXPERIENCE IN THE SELECTED AREA		
(max 1000 characters)		
TEACHING EXPERIENCE		
(max 1000 characters)		
I hereby consent to the processing of my personal data pursuant to Article 13 of Legislative		
Decree 196/2003 and Article 13 GDPR 679/16.		
Date	Signature²	
☐ Attachments: Copy of an ID card		
□ Copy of the curriculum vitae		

 $^2$  The signature is considered authenticated if a copy of a valid certificate of identity of the undersigned is attached to the application form.