



UNIVERSITÀ
DEGLI STUDI
FIRENZE

FORLILPSI

DIPARTIMENTO DI FORMAZIONE,
LINGUE, INTERCULTURA,
LETTERATURE E PSICOLOGIA

VISITING PROFESSOR/RESEARCHER DECLARATION

I, the undersigned Visiting Professor/ Researcher

Name

Surname

Date of birth _____ Place of birth

Nationality

Address

Country _____ Zip code _____

Passport No. _____ Issuing Country _____

Date of issue _____ Date of expiry

Address in Florence _____

(Italian law 18.5.1978, n. 191 following Art. 12 - D.L. 21.3.1978, n. 59 and updates to be checked contain rules concerning the "Comunicazione di cessione di fabbricato". According to Italian law 18.5.1978, n. 191, whoever, for any reason, provides lodging to or hosts foreigners in his/her own house, is required to inform the police authorities through a declaration of hospitality. The communication shall be in writing within 48 hours to the local competent police authorities.)

Telephon number _____ Email

Institution of affiliation

From: _____ To: _____

For study and collaborative research (specify:.....)

I DECLARE THE FOLLOWING:

ACCIDENT INSURANCE

- already provided by the home institution
- already provided on my own / personal budget
- already subscribed the accident insurance policy offered by the University of Florence paying the special fare of Euro 6,50

THIRD PARTY LIABILITY INSURANCE FOR UNINTENTIONAL DAMAGE

- already provided by the home institution
- already provided on my own / personal budget

HEALTH INSURANCE

- already provided by the home institution
- already provided on my own / personal budget

TRAVEL AND ACCOMODATION EXPENSES

- All expenses including travel and accommodation will be covered by the institution of affiliation
- I will cover all expenses including travel and accommodation
- I will ask the University of Florence for coverage of expenses related to
 - Travel Accommodation Board (submitting the original receipts)

as previously agreed with the Coordinator of the Agreement / Responsible of Funds within the University of Florence / Department of Education and Psychology.

I am aware of the entry procedures foreseen by law according to my nationality, country of residence, purpose of travel and length of stay. I respected all procedures foreseen by law.

(Town), (date) _____

Visiting Professor/Research _____

(Signature)
