

**APPLICATION FORM
ASSISTANT / ASSOCIATE / FULL PROFESSOR**

Internal Reference (School use only):

SEARCH ID

Search number:

(From notice)

POSITION

Rank:

Field:

1. PERSONAL DATA

Name (full name):

Birth date:

Gender:

Country of citizenship:

Passport number:

Mailing address:

Postal code:

City:

Country:

Telephone number:

E-mail:

2. ACADEMIC BACKGROUND

PhD

Field:

Date:

Granting Institution:

“Agregação” (if applicable)

Field:

Date:

Granting Institution:

3. STATEMENT

The above information is truthful and accurate.

I am in compliance with section 17 of Portuguese “Lei Geral do Trabalho em Funções Públicas”, with either section 40 (Full Professor search), section 41 (Associate Professor search) or section 41-A (Assistant Professor search) of the Portuguese Statute of Teaching Careers in the Higher Education (ECDU), as well as with the University of Lisbon Regulations for Teaching Careers.

I am aware that if I am offered a position I will have to provide evidence of the academic requirements for that position within 10 days.

I am also aware that failure to do so will automatically revoke the offer.

I agree that all communications required by this search procedure can be made to my email address above.

I am also aware that personal data in my application file will be made available to the search committee and may be made available to other applicants.

Signature

Date