

To the SISSA Director

Object: "150 hours" collaboration request of payment

The undersigned.....
born in.....on
address.....
fiscal code.....

D E C L A R E S

to have carried out n. hours of collaboration in the SISSA
.....
from to(art. 13 L. 2.12.1991, n. 390 and subsequent modifications)

A S K S

to be paid for the hours carried out (€ 10.30/hour), for a total amount of
€ (.....)

Trieste, (date) _____

(signature)

=====

The undersigned responsible
for the activity carried out by Dr.
confirm / do not confirm the regular execution of the above mentioned activity judging the student's job
excellent / good / sufficient / insufficient

(signature)

=====

Si autorizza la liquidazione:
Il Segretario Generale