**OGGETTO: CONFERIMENTO D’INCARICO / *DUTY ASSIGNMENT***

Il sottoscritto Prof. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Direttore del Dipartimento di \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, su proposta del

*The Director of the Department of* ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** *, on suggestion from*

Prof. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONFERISCE / *confers***

l’incarico per la conferenza sul tema / *an assignment for (conference name)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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da tenersi i giorni / *during (time period)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, al seguente relatore / *to the conference lecturer*:

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| --- |
| Cognome / *Last Name* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nome / *First Name* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Codice Fiscale\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Partita I.V.A. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***Italian Fiscal Number VAT Number* |
|  |

 Nato/a a / *Born in (city, country)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ il / *date* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
|  INDIRIZZO DI RESIDENZA *RESIDENTIAL ADDRESS* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | DOMICILIO FISCALE (se diverso) *FISCAL RESIDENCE (if different)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**e autorizza il pagamento di / *and authorises the payment of***

Compenso lordo di / *gross remuneration of* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Euro (compresi tutti gli oneri a carico dell’Università di Verona e del relatore / including all tax charges borne by the University of Verona and the conferenxce lecturer)

Spese di viaggio documentate (ricevute e biglietti in originale) / *documented travel expenses (please provide original receipts and tickets)*

Spese di pernottamento documentate (fatture o ricevute in originale) / *documented accommodation expenses (original invoices or receipts)*

**Copertura finanziaria** (per l’Organizzatore: specificare fondo) …………………………………………….……………………….………….

**Modalità di Pagamento richieste dal relatore/ *method of payment chosen by conference lecturer*:**

C/C bancario / *account number* …………………………..…..……….. Banca / *Bank* …………………………………………………...……

*For Italy:* ABI……………………………………….…..CAB………………………..…..……..………CIN………………….................………..

*For Europe:* IBAN……………………………………………………………………………………………………………………………………..

*Other States:* Routing number……………………………………………………………………………………..………………………………..

 SWIFT / BIC code …………………………………………………………………………………………………………………………….

 Agenzia / *Branch*: ………………………………………………………………………. Stato / C*ountry*: ………………………………..

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| Verona, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IL RELATORE / *The conference* l*ecturer* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IL DIRETTORE */ The head of department* |    L’ORGANIZZATORE / *The conference organizer*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_