

MODEL A2

**APPLICATION TO PARTICIPATE IN THE CTT T TEST JURIES
LIVIGNO (SO), 4th and 5th December 2025**

To the Regional College of Ski Instructors of Calabria

PEC: collegiomaestriscicalabria@pec.it
e-mail: collegiomaestricalabria@gmail.com

The undersigned

Name and Surname: _____

Place of Birth: _____ Date of Birth: ____ / ____ / ____

Address: _____

Street/Square: _____ Postal Code: _____

City: _____ Country: _____

Phone: _____ E-mail: _____

REQUEST

To be admitted to participate in the selection for the CTT T **Test Juries**, pursuant to Public Notice No. Prot. 96 of 30/10/25 for the collection of expressions of interest for the composition of the Technical Commission and the Test Juries, issued by the Regional College of Ski Instructors of Calabria.

DECLARES

Pursuant to and for the purposes of Articles 46 and 47 of D.P.R. 445/2000, fully aware of the criminal penalties provided under Article 76 of the same decree in case of false statements, as follows:

1. to enjoy civil and political rights;
2. not to have any criminal convictions that would prevent the exercise of the profession of ski instructor;
3. not to be subject to preventive measures or administrative prohibitions;
4. not to have any pending criminal proceedings;
5. not to have ongoing civil or administrative disputes with the Regional College or other Colleges of ski instructors;
6. to be an Italian citizen or a citizen of another EU member state, including EFTA/EEA citizens or third-country nationals who enjoy equal treatment (e.g., long-term resident, seasonal worker);
7. to hold a professional qualification listed in Annex I of Delegated Regulation (EU) 2019/907, as documented or certified IMI;
8. to have passed the Common Training Test (PFC) or Eurotest before the entry into force of the regulation, as certified by the attached certificates or IMI attestation;
9. to hold a professional liability insurance for their professional activity;
10. to be aware that the appointment will be made by the College according to the criteria set out in Article 3 of Notice Prot. No. 96 of 29/10/25;
11. to authorize the processing of personal data pursuant to Regulation (EU) 2016/679 (GDPR).

Place and Date: _____. **Signature:** _____

Attachments:

- Copy of valid identity document;
- Copy of professional qualification or IMI attestation;
- Copy of RCT professional liability insurance.