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|  |  | **APPLICATION FORM FOR A POSITION OF** ***ASSOCIATE PROFESSOR*** |
|  |  |  |

**INTERNAL REFERENCES**

|  |  |
| --- | --- |
| Public notice number (nº do edital) | 1335/2023 |

|  |  |
| --- | --- |
| Department | Mathematics (DM) |

|  |  |
| --- | --- |
| Disciplinary field | Geometry |

**PERSONAL DATA**

|  |  |
| --- | --- |
| Name |       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date of birth |    |    |      |  Gender: Male [ ]  Female [ ]  |

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| --- | --- |
| Nacionality |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Identification number |       | Identification document |       |

|  |  |
| --- | --- |
| Address |       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Postal Code |       |  | City |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Country |       | Phone Number |       |

|  |  |  |
| --- | --- | --- |
| E-mail  |         | Please make sure your email address is spelled correctly and is active throughout the application process |

**CURRENT SITUATION**

|  |  |
| --- | --- |
| Institution |       |

|  |  |
| --- | --- |
| Position |       |

**R1** | V 4 EN\_ref | 2015.05.20

**REFERENCES**

|  |  |
| --- | --- |
| **1.** Name |       |

|  |  |
| --- | --- |
| Institution |       |

|  |  |
| --- | --- |
| Position |       |

|  |  |  |  |
| --- | --- | --- | --- |
|  E-mail |       |  *Phone Number* |       |

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| --- | --- |
| **2.** Name |       |

|  |  |
| --- | --- |
| Institution |       |

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| Position |       |

|  |  |  |  |
| --- | --- | --- | --- |
|  E-mail |       |  *Phone Number* |       |

|  |  |
| --- | --- |
| **3.** Name |       |

|  |  |
| --- | --- |
| Institution |       |

|  |  |
| --- | --- |
| Position |       |

|  |  |  |  |
| --- | --- | --- | --- |
|  E-mail |       |  *Phone Number* |       |