

I hereby confirm the declaration of the PhD candidate
related to the originality of the doctoral thesis

Doctoral supervisor,

DECLARATION

The undersigned, _____,
PhD candidate within the Doctoral School _____, of the
Faculty of _____, University of Bucharest, in the field of
_____, I declare on my own responsibility
that this thesis is the result of my work, through my research and through the information
obtained from the referenced and indicated sources, according to the ethic rules, in notes and
reference list according to the provisions of art.143 para. (4) and art. 170 from the Law of
national education no.1/2011, with the subsequent amendments and completions, and of art.65
para. (5) – (7) of the Doctoral studies code, approved by the Government Decision
no.681/2011, with the subsequent amendments and completions. I hereby declare that I have
not tacitly nor illegally used the work of others and that no part of the thesis violates the
intellectual property rights of others, natural or legal person. I hereby declare that the thesis
has not been presented in the current form within other superior education institutions in order
to obtain a scientific or didactic title or grade.

Signature _____

Date _____

Approved,

Approved,

Doctoral supervisor,

President of the committee

Dear General Director,

The undersigned, _____,
PhD candidate in the field of _____, doctoral
supervisor _____, taking into account that all of
the favorable reports and documents related to payment of the reviewers have been submitted
in the file, I kindly request the approval of the public defense* of the doctoral thesis entitled:

on ____/____/_____, hours: _____, in the lecture theater/hall_____.

Date _____

Signature _____

* The title in Romanian and its correct translation in English, French or German. If the doctoral thesis is written in a foreign language, the title must be written first in the foreign language and then its Romanian translation. The title (in both Romanian and the foreign language) will be written on the doctoral diploma.

The request will be submitted to the secretariat of the Doctoral School at least **25 days** before the set date for the defense of thesis.

** The request will be accompanied by the declaration on the compliance between the text of the doctoral thesis on the basis of which the similarity report was issued and the doctoral thesis will be publicly defended (Appendix 13bis).

DECLARATION*

related to the option for publishing the doctoral thesis

The undersigned, _____,
PhD candidate at the Doctoral School of _____,
of the Faculty of _____, University of Bucharest, in the
field of _____, author of the doctoral thesis entitled

_____, doctoral supervisor
_____, and publicly defended
on ____/____/____, I hereby declare that:

☐ **I do not choose**

☐ **I choose**

to distinctly publish the doctoral thesis or chapters of it.

If I check “**I do not choose**” to distinctly publish the doctoral thesis or chapters of it, the full content of the thesis will immediately be freely available on the national platform of the Ministry of Education with the assignment of an intellectual property copyright.

If I check “**I choose**” to distinctly publish the doctoral thesis or chapters of it, I will notify the University of Bucharest of the publishing of the doctoral thesis or chapters of it and I will send the citation and a link (or links) of the publication(s) in order to make them public on the national platform of the Ministry of Education.

I am aware that if, **within 24 months** from the date of the public defense of the doctoral thesis, **I will not notify the University of Bucharest of the distinct publishing of the doctoral thesis or chapters of it, the doctoral thesis will be freely available** on the national platform of the Ministry of Education with the assignment of an intellectual property copyright.

Signature:

Date:

* According to H.G. no. 134/2016, in addition to H.G. no. 681/2011 related to the doctoral studies code, with the subsequent amendments and completions.

NOTICE ON THE CONFIDENTIALITY OF PERSONAL DATA

According to the EU Regulation 679/2016 on protecting natural persons in the processing of their personal data, the University of Bucharest is a data operator.

Personal information from the categories: identity, contact details, education, professional experience etc. are given to the University of Bucharest by a PhD candidate for the management of the doctoral programs organized within the faculties of the University of Bucharest. You are obliged to supply these personal data, in order to fulfill the previously mentioned purpose, and the refusal of supplying these data can lead to difficulties or impossibility of finishing the doctoral program.

The information is legally processed according to the Law of National Education no. 1/2011 with the subsequent amendments and completions; Order no. 3482/2016 on approving the Regulation of organizing and functioning of the National Council for Attestation of University Degrees, Diplomas and Certificates; Regulation of the Council of the Doctoral Studies etc. According to the (EU) Regulation 679/2016, the processing of personal data meets one of the following conditions: the processing is necessary for the fulfillment of a contract which the concerned person is part of; the processing is necessary for fulfilling a legal obligation of the operator or the processing is necessary for fulfilling a duty that serves a public interest or that results from the exercise of the public authority with whom the data operator is involved.

The information collected about you are kept in written and/or digital form. We assure that the information we possess are kept in safe locations, with an adequate level of security and with allowed access only for authorized personnel.

As the data protection regulations allow, in order to fulfill our contractual and legal obligations, we send your personal data to national authorities, service providers etc. Currently, the receivers of the personal information are the Ministry of Education and Research, CNATDCU / UEFISCDI etc.

If you wish to make a request based on the EU Regulation 679/2016, in order to efficiently address this request, you should supply us with information that allow us to establish your identity and indicate the data you request.

The detailed notice on the processing of data of PhD candidates is available on the website of the University of Bucharest at www.unibuc.ro/protectia-datelor/.

Approval

Doctoral supervisor,

DECLARATION

on the compliance between the text of the doctoral thesis on the basis of which the similarity report was issued and the doctoral thesis will be publicly defended

The undersigned _____,
PhD candidate within the Doctoral School _____ of the
Faculty of _____, University of Bucharest, in
the field of _____, I declare on my own responsibility that the printed
doctoral thesis **is / is not** identical in relation to the electronic form submitted in order to issue
the similarity report.

Compared to the electronic form, the following changes have been made*:

-
-

Signature _____

Date _____

*All of the reasons / changes will be written.

UNIVERSITY OF BUCHAREST

TAXPAYER'S DECLARATION

The undersigned, _____,
employee at _____,
taking into account the provisions of Law no. 571/2003 on the Fiscal Code, in order to
establish the additional personal deductions for the persons in my care, I hereby declare on my
own responsibility that the following data are real and reflect the current situation, knowing
that false statements are punishable according to the penal code.

I oblige to notify the employer within legal deadline if changes in the current situation
will occur and to submit justificatory documents.

PERSONAL DATA OF THE REVIEWER

Full name _____

Personal identification number _____

Residence: Locality _____ Address: _____

No. _____, Block _____, Building _____, Apartment _____, District _____, County _____

I request that the remuneration to be transferred in to the account open at _____

(A bank statement will be attached).

DECLARATION

The undersigned, _____,

Personal Identification Number _____, ID series _____, no
_____, issued by _____, on _____.

I hereby declare on my own responsibility that I own a national medical insurance with the
National Health Insurance Office of the county of * _____.

*The National Health Insurance Office where you own the insurance will be written.

*The National Health Insurance Office where the employee owns the insurance is the
National Health Insurance Office with whom their GP signed the contract.

Date

Signature