

MINISTRY OF EDUCATION FEDERAL UNIVERSITY OF PARAÍBA

APPLICATION FORM

USE BLOCK LETTERS			
Name:			
ID number / issued by:	Issue date:	CPF:	
E-mail address:	Contact numbers with local code:		
Home address:			
If the application is presented by proxy, fill out the fields below:			
Name of representative:			
Traine of representative.			
ID number / issued by:	Issue date:	CPF	
Home address of the representative:			
In accordance with Consepe Resolution N			
Selection Process for Visiting Professor refe	erred to In Notice No. 20/2023, pub	olished in the Official Gazette of Brazil no.	
74, of 18 April 2023, section 03, p. 64.			
Responsible Department:	Field of knowledge you wish to a	pply for:	
Exemption¹: CadÚnico ()	Candidate self-declared a person	Candidate self-declared a person of color ² : yes () no ()	
Bone marrow donor ()			
Person with disability ³ : yes () no ()	Inform the type of special assista	Inform the type of special assistance (if necessary):	
I also declare that I agree with the regulations contained in Consepe/UFPB Resolution no. 24/2019, and the			
applicable legislation, and in the notice for the Simplified Selection Process mentioned above and other procedures			
defined by the Selection Committee.			
I affirm that the information provided in this form is true, and that all documentation presented are regular and			
true; and that I am aware that, in case of false statement, there may be administrative, civil and criminal sanctions			
applicable.			
Place and date S	nature of the candidate or legal representative		

¹ To be exempt, it is necessary to submit, together with the documents listed in item 4.3 of the notice, a document proving the condition informed at the time of application, according to items 5.1.1 and/or 5.2.

² If the candidate declares him/herself a person of color, to complete the application, it is necessary to attach a self-declaration statement, in accordance with item 7.5.2 of the notice.

³ If the candidate declares him/herself a person with disabilities, to complete the application, it is necessary to attach the medical certificate, in accordance with item 6.7.2 of the notice.