

UNDERTAKING

I, XXX XXX acknowledge that the privileges of users given to me by the CNIS for the period between the dates of DD/MM/YYYY to DD/MM/YYYY is subject to the following conditions, and may be withdrawn without notice if I fail to abide by them.

1 UNIVERSITY CONDITIONS

1.1 I will comply with the terms of the CNIS's Statutes, Decrees and Regulations; and will honour the codes of practice of the instruments and facilities which are under the authority of the CNIS.

1.2 I will comply with all CNIS laboratories regulations, codes and guidelines published from time to time; and pay any bench fees and charges which may be prescribed there for the facilities which I use.

1.3 I accept that the terms of the CNIS Statutes relating to intellectual property apply to me; and that the University will be entitled in accordance with those terms to claim ownership of intellectual property which I produce.

1.4 I will treat details of any procedures, projects or research of which I become aware in the course of my work or my visits to the CNIS as strictly confidential. I will not disclose such information to any person unless I have express written permission to do so, or the information is already clearly in the public domain.

1.5 I consent to the processing of the personal data contained in this form, and any other personal data which I may provide to the CNIS whilst I am a Visitor. Such data may be used for purposes connected with my work in the Center, for the protection of my health and safety, and for any other purpose sanctioned under data protection legislation.

1.6 I will leave the premises on or before DD/MM/YYYY. I will not remove any item which is not mine from the CNIS without the written permission of the someone from the CNIS personnel.

1.7 At no time will I use CNIS facilities for my own business purposes, and I recognize that I have no right to the use of such facilities for personal purposes.

1.8 At no time will I represent to any party that I am authorized to speak on behalf of the CNIS or the Department, or to sign any document on behalf of the CNIS. I will not use any of the names, marks, logos or letterheads of the CNIS except in the course of my participation in a CNIS project and with the prior written consent of the CNIS supervisor.

1.9 I confirm that I have the right to work in or to visit the Italy and, where necessary, hold the appropriate visa for the duration of my stay.

1.10 I confirm and warrant to the CNIS that:

(a) I have provided the CNIS Administrator with a written declaration, detailing any materials owned by me or by a third party which I intend to introduce to the CNIS facilities; and,

(b) I am an independent researcher, and that none of the commitments above will conflict with any obligations to an employer or to any other party.

1.11 Your personal referent will be DR XXX, to whom I am obliged to contact discuss any problem relative to my work and accommodation during my stay.

2.2 The critical department regulations are those relating to safety procedures. Copies of our safety notes will be given to you when you arrive.

2.3 When you are writing externally on a CNIS project, please use CNIS stationery and CNIS e-mail address (which can of course quite easily be forwarded to your normal e-mail address). If you want to order supplies, please talk to your CNIS reference in the first instance.

ACCEPTANCE

I accept the appointment as an academic visitor on the above terms and conditions.

Name:

Address:

Signature: Date: