

### Abbreviated Curriculum Vitae (CV)

**First Name:** Alessandra  
**Middle Name:**  
**Last Name:** Cassano  
**Profession:** Physician medical Oncology - Fondazione Policlinico Gemelli  
**Affiliation Name:** Fondazione Policlinico Gemelli - Facoltà di Medicina e Chirurgia Università Cattolica del Sacro Cuore

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**Study Location Name (if different):**  
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**Country:**  
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**Fax:**  
**Email (if different):**

#### EDUCATION

University	Degree	Year Completed
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#### MEDICAL EDUCATION

University	Degree	Year Completed
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Università Cattolica del Sacro Cuore	Medical Degree	1984-1985
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Università Cattolica del Sacro Cuore	Oncology Specialization	1989-1990
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### Abbreviated Curriculum Vitae (CV)

#### PROFESSIONAL EXPERIENCE/OTHER RELATED TRAINING

<b>Institution</b> Università Cattolica del Sacro Cuore	<b>Medical Field</b> <b>Year (Completed)</b> Oncology PhD            1994
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**Professional License Number:** 8226 ORDINE MEDICI FIRENZE del 07 Feb 2018

**State/Region/Province:**

**Expiration Date:**

**Research Area(s) of Interest:**

**Clinical Trial Phases:**     I     II     III     IV

**List your most Current Clinical Research below:**

Therapeutic Area:	Type of Trial	Phase:	Completed	On-Going
Breast Cancer	Academic	▼ III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Carcinoma of the head and neck	Industry	▼ III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lung Cancer	Academic	▼ III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Choose an item		<input type="checkbox"/>	<input type="checkbox"/>
	Choose an item		<input type="checkbox"/>	<input type="checkbox"/>
	Choose an item		<input type="checkbox"/>	<input type="checkbox"/>
	Choose an item		<input type="checkbox"/>	<input type="checkbox"/>
	Choose an item		<input type="checkbox"/>	<input type="checkbox"/>

**GCP Training Documentation (Course Provider/Year Completed):** Jun 1, 2016

IN COMPLIANCE WITH THE ITALIAN LEGISLATIVE DECREE NO. 196 DATED 30-06-2003, I HEREBY AUTHORIZE YOU TO USE AND PROCESS MY PERSONAL DETAILS CONTAINED IN THIS DOCUMENT.

By signing this form, I confirm that the information provided on this Abbreviated CV is accurate and reflects my current employment and qualifications:

Signature: Alexis Cocciano

Date: 1/12/2017

1/12/2017  
cc

*True copy of original*

*Alexis Cocciano    07 Feb 2018*