COMPOSTELA GROUP OF UNIVERSITIES-CETYS CHAIR

Call 2023

Declaration of responsibility

I (undersigned person) **Name and surname**
with ☐ identification card ☐ passport **Number of ID card or passport**
HEREBY DECLARE that the data provided in this online application form and the annexes submitted with my application for the Compostela Group of Universities-CETYS Chair 2023 are true and correct and, in the event that they change, I undertake to report any changes immediately so that they have the appropriate effect in the current edition.

I DECLARE that I acquired the commitment to comply with and respect the guidelines of 2023 call.

Date: Signature: