

SERVEI D'ESTUDIANTS

## **AFFIDAVIT**

Mr./Ms.:
Passport/NIE:
DECLARE:
<ul> <li>The person submitting this Request declares under his/her responsibility, in accordance with Art. 69 of Law 39/2015, of October 1, on the Common Administrative Procedure of Public Administrations, the following terms:</li> <li>That meets the requirements established in current regulations on access and admission to University Degree studies.</li> <li>That the documentation attached to the application is true and faithful reflection of the original that is in your possession.</li> <li>That the University may require the presentation of the original documentation at any time for verification purposes.</li> <li>That you are aware that the lack of veracity of the information or the falsification of the documentation presented will lead to the invalidity of all administrative acts issued based on said information or documentation, without prejudice to the liability that may arise from such circumstance.</li> </ul>
Date and signature :





AENOR