Hospital Universitari Sagrat Cor





Personal data of the candidate

Candidate name and surname **Presented Candidate** Contact phone Email DNI o NIE University at wich the defense was made Submission job title Tutor and membres of the jury of the defense Request submission date □ I accept that: If the candidate submitted moves to the final stage, the presentation and defence of the nomination will be carried out in person on the day and time agreed on the basis of the award. □ The application presented follows the ethical basis of the International University of Catalonia.

Signature and date