APPLICATION FORM

By this document the applicant accepts the bases of the call, states the veracity of the documents and data presented in the documents and gives the express consent for the processing of personal data for the evaluation of the application.

Name and surname of the person responsible for the application:

E-mail of the person responsible for the application:

Place and date:

Modality (check the corresponding box):

- A. Best methodological contribution.
- B. Best applied contribution.

Contr	ibi	ition	title [.]
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Date of publication or acceptance: _____

Journal:	

Volume:

Start /	end page:		

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Summary of the contribution (maximum 200 words):

Quality indicators of the contribution (maximum 200 words):

Signature of the person responsible for the application:

For any questions or queries, we would appreciate it if you could contact us by email: <u>datai@unav.es</u>