**Declaration of Honour**

**(Research Fellowship (BI))**

I, **Name**, bearer of the Identification Card **Number**, valid until **Validity date**, resident in **Address**, following my candidacy to the project **Project** declare, on my word of honour, that the information included in my *curriculum vitae* is truthful.

I also declare, under penalty of exclusion, to comply with all the requirements necessary for the research fellowship award to which I am applying for, namely:

1. To be enrolled in:

a study cycle that does not confer an academic degree but is integrated in an educative project from a Higher Education Institution, developed in association or cooperation with one or several R&D Units and in the scope of the project of this fellowship;

a master’s course;

a PhD programme.

1. To not exceed, with the celebration of this fellowship contract and all possible renewals, the following deadlines (please select the one that applies to the type of fellowship to which you apply):

one year, if the fellowship is for bachelor or master’s degree holder enrolled in a study cycle that does not confer an academic degree;

two years, if the fellowship is for a student enrolled in a master’s degree cycle;

four years, if the fellowship is for a student enrolled in a doctoral degree cycle.

I furthermore declare:

- To acknowledge that, without prejudice of the penal law, the provision of false statements about relevant personal information, pertinent for awarding or renewing this fellowship, under the terms of article 25 of the *Regulamento de Bolsas de Investigação da FCT, I.P.*, leads to the cancelation of the present fellowship;

- To acknowledge that false statements may imply the obligation to return, in full, all the funds received and reimburse FCiências.ID of other damage eventually caused;

- To commit to inform FCiências.ID of the obtainment of any other fellowship or subsidy/grant, of the exercise of any other profession and/or activity, or the registration in other study cycle.

**Place of signature**, **date**

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(Signature of fellowship candidate)