





International course in Epidemiology, Biostatistics and Qualitative Research Methods (EBQ)

October 2023 – November 2023

l	(name and surname), do hereby declare that
what is stated in my application form	n is true to the best of my knowledge and belief. In the event I ention the VLIR-UOS as (co-)sponsor of the generated output,
such as scientific art	icles, poster, interview, oral presentation, etc.
Signature of applicant	
Date and place:	
A scanned signature is allowed.	
o be completed by the person grant	ing permission to the applicant to travel (i.e. employer,
promoter, professor, etc.).	
Declarations by the Superviso	or .
Declarations by the Superviso	or
I,	(name and surname) hereby certify that applicant
<i>I,</i>	(name and surname) hereby certify that applicant (name and surname) is granted permission to attend the EBQ
l,((name and surname) hereby certify that applicant (name and surname) is granted permission to attend the EBQ from October to November 2023.
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l,course j course j I will provide a sup In the letter of support, the following is:	
l,course j course j I will provide a sup In the letter of support, the following is:	
I,	
l,course j course j I will provide a sup In the letter of support, the following is the applicant and the institute, 2) confirm	
I,	