



**FOR INFORMATION PURPOSES ONLY**  
**(you must fill out and send the Catalan or the Spanish version of this form)**

**APPENDIX 3**

**DECLARATION OF RESPONSABILITY**

APPLICANT:

ID no./VAT no./Passport no.:

I hereby declare under my own responsibility that:

1. I comply with the obligations set out in article 11 of the Order of the Regional Minister of Education and Culture of July 1st, 2009, as well as those set out in this grant call.

2. The documentation I submit with the application form is accurate.

3. I am not subject to any reason for disqualification or incompatibility to be a beneficiary of the grant, according to the applicable regulations.

4. I have proper and necessary organization and capacity in order to guarantee the accomplishment of the subsidized activity in the moment the call was published.

5. I am up to date with payments to the national Treasury, the Social Security and the Regional Administrations.

6. In the case of the applicant being a company, it complies with the current legislation regarding the hiring of workers.

7. I declare that: (select the option that applies)

**I HAVE NOT** applied for a grant from any other public or private entity for this activity.

**I HAVE** applied for a grant for this activity from the following entities:

Entity:

Amount:  €       Awarded     Rejected     Pending resolution

Entity:

Amount:  €       Awarded     Rejected     Pending resolution

Entity:

Amount:  €       Awarded     Rejected     Pending resolution

8. I declare that, in the current fiscal year and in the two previous fiscal years: (select the corresponding option)

I have **NOT** been awarded with any minimis grants.

**YES**, I have been awarded with the following minimis grants:

Entity:

Amount:  €      Year:

Entity:

Amount:  €      Year:

Entity:

Amount:  €      Year:

According to the article 28 of the law 39/2015 of the administrative procedure, it is understood that consent is allowed for the consultation of the data mentioned above.

Otherwise, if you DO NOT give your consent for the query, please check the following box:

I do not give consent to the consultation of the data mentioned above and, instead, I provide the required data and certifications that support my application.

In order to certify for the record everthing that has been declared above, I sign this document:

<p>Date (dd/mm/yyyy):</p> <input type="text"/>	<p>Applicant's signature:</p>
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