**ANNEX I**

**APPLICATION FOR THE RECOGNITION OF THE EQUIVALENCE OF A FOREIGN PhD DEGREE**

(**Royal Decree 967/2014, 21 November)**

* **PERSONAL DATA OF THE APPLICANT**

|  |  |
| --- | --- |
| Surnames:      | First name:      |
| Place and date of birth:      | Nationality:      |
| ID card/passport no:      |  |

* **PERSONAL DATA OF THE REPRESENTATIVE (only if acting by proxy)**

|  |  |
| --- | --- |
| Surnames:      | First name:      |
| ID card/passport no.:      |  |

* **DATA RELATING TO THE APPLICATION**

|  |
| --- |
| Application for recognition of the diploma of:      |
| Awarded by the University / Higher Education Institution of (name, city and country):      |
| To the Spanish university degree of:      |

* **CONTACT DATA FOR THE PURPOSE OF NOTIFYING THE PERSON CONCERNED**

|  |  |  |
| --- | --- | --- |
| Street and house number:      | Town:      | Postcode:      |
| Province:      | Country:      | Telephone/Mobile phone:      |
| E-mail:      |  |  |

**5. OPTIONS FOR THE DELIVERY OF THE CREDENTIAL IN CASE OF GRANTING THE EQUIVALENCE**

|  |
| --- |
|  At the Doctoral School. Doctoral Unit of the University of León. At the regional government of the province of: Spanish Consulate in:  |

**In accordance with the provisions of Organic Law 15/1999, on the Protection of Personal Data, we inform you that the data requested on this form are necessary and will be included in a file of students of the University, whose purpose is the academic and administrative management of students, as well as their participation in university services. We inform you that you may exercise your rights of access, rectification and cancellation of your data by sending a letter to the General Secretariat of the University, enclosing a copy of the document proving your identity.**

………………………………….. [location], date; ………………………………… [YYYY-MM-DD]

(Applicant’s signature)

Signed by: ……………………………………………

 [***LINK TO DATA PROTECTION INFORMATION***](https://www.unileon.es/estudiantes/estudiantes-doctorado/normativa-proteccion-datos)

**REVERSE**

 **OF APPLICATION**

|  |
| --- |
| **NAME OF APPLICANT:** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DOCUMENTS ACCOMPANYING THIS APPLICATION**

|  |  |
| --- | --- |
|  | Responsible declaration according to the model in Annex II |
|  | Certified electronic copy of ID card or Passport |
|  | Certified electronic copy of the degree and of the academic certification of the studies carried out by the applicant and which gave him/her access to the doctorate, stating, among other things, the official duration in academic years, the syllabus followed, the subjects taken and the time load of each one of them. |
|  | Certified electronic copy of the diploma for which equivalence is requested or of the certificate attesting to its issue. |
|  | Certified electronic copy of the certificate of the doctoral studies stating, in addition to other information, the title of the thesis, the grade obtained and the members of the examining board that judged the thesis |
|  | Explanatory summary of the thesis , written in Spanish, as well as a copy of the doctoral thesis. |
|  | Proof of payment of the fee established in the Decree regarding Public Fees of the Junta de Castilla y León for each academic year. |
|  | Applicant’s *Curriculum vitae*. |
|  | Other (please specify). |

 |

**Note:** Documents issued by the authorities of the Member States of the European Union or signatories to the Agreement on the European Economic Area do not require any legal process to certify their authenticity.

The applicant must pay the official current fee established for the equivalence of the academic doctorate level at UNICAJA BANCO, account number ES13 2103 4200 33 0032002531. Proof of payment of the aforementioned fee is a necessary requirement for the procedure to be initiated.

**ANNEX II**

**AFFIDAVIT**

Mr/Ms …………………………………………………………………………………………………………………………..………, with ID card or passport no. …………………….………….., mailing address: ……………………………………………………, telephone no.: …………………………….…………., e-mail address:……………………………………………………………, having applied to the University of León for the equivalence of their studies completed abroad at the academic level of Doctor, taking into account the provisions of Art. 4 of the fifth additional provision of R.D. 967/2014, of 21 November, which establishes the requirements and procedure for the approval and declaration of equivalence for official university degrees and academic levels and for the validation of foreign higher education studies of official degrees in Architecture, Engineering, four-year degrees, Technical Architecture, Technical Engineering and three-year degrees,

**DECLARES**: that the foreign degree for which a request for a declaration of equivalence has not been granted equivalence at another Spanish university.

……………….…………………….………. [location], date: ……………………………………….. [YYYY-MM-DD]

(applicant’s signature)