

# POST N'SPEAK

## INFORMED CONSENT



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Pólo das Ciências da Saúde, Unidade Central, Piso -1,  
Azinhaga de Santa Comba, Celas, 3000-058 Coimbra



I, \_\_\_\_\_,  
holder of the identification document number/passport  
\_\_\_\_\_, issued in \_\_\_\_\_, on \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
OR valid until \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
declare that I have read the Rules and  
Regulation of the VIII Post N' Speak and hereby authorize my student  
\_\_\_\_\_, holder of  
the identification document number \_\_\_\_\_, issued in  
\_\_\_\_\_, on \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
OR valid until \_\_\_\_/\_\_\_\_/\_\_\_\_\_; to  
present \_\_\_\_\_ the \_\_\_\_\_ project  
\_\_\_\_\_ in the VIII Post N' Speak, a competition integrated in the XI In4Med.

\_\_\_\_\_  
(Supervisor's Signature according to the identification document)

Date \_\_\_\_/\_\_\_\_/2021



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