



Academic data use agreement for companies and institutions

Person concerned

Name and surname: _____
ID/Passaport number: _____
Phone Number: _____
Email address: _____

Receiving company or institution:

Company or institution name: _____
Tax Identification number (NIF): _____
Name and surname of the company representative: _____
ID/Passaport number: _____
Phone number: _____
Email address: _____

I authorize:

The Escola T cnica Superior d'Enginyers Industrials de Barcelona to communicate to the receiving company the next information:

- Communicate my academic data to the company or institution specified on the previous section. Purpose¹ of the data: _____

- Others: _____

Signature of the requester:

Name: _____ Place and date: _____ / _____ / _____ , _____

Necessary documentation:

- Photocopy of the current ID number/Passaport of the ordering person
- This document completely and properly signed

THIS AUTHORIZATION WILL NOT HAVE ANY VALIDITY WITHOUT THE ORIGINAL SIGNATURE OF THE ORDERING PERSON. DOCUMENTS WITH A SIGNATURE THAT DIFFERS FROM THE ONE ON THE ID CARD OR WHERE IT IS SCANNED OR PHOTOCOPIED WILL NOT BE ADMITTED.

¹ It is compulsory to specify the reason of the data communication