



RESEARCH TEAM FILE

OPE project code:		Official project code:	
Project title:			
Acronym:			
RESEARCH TEAM			
Principal Investigator: Yes	No		
First surname:	ç	Second Surname:	
Name:	ſ	D.N.I.:	N.I.P.:
Academic qualifications:			
Professional category:			
Department:			
Center:			
Research Institute:			
Telephone:	5	a-mail:	
Imputesperson/month			
Yes No			
PARTICIPATION IN THE PROJECT			
Start date:			
End date:			
Actions /Packages in which it participates:			

Researcher Compliance Signature

Principal Investigator Signature Conformance