**Previous Intra-Africa/ACP Award Declaration**

*Please tick the applicable box and provide the required information.*

I, [FULL NAME AND SURNAME AS PASSPORT], born on the [DATE OF BIRTH], in [PLACE OF BIRTH]

hereby declare that

**PREVIOUS Intra-Africa/ACP SCHOLARSHIP, select only one of the following options:**

□ OPTION 1

I have never benefited from Intra-Africa/ACP scholarship.

□ OPTION 2

I have benefited from an Intra-Africa/ACP scholarship according to the following details:

* Name of the previous Intra-Africa/ACP scholarship that awarded you the scholarship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Type of mobility carried out during this previous scholarship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place and date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_