

   <p>GOBIERNO DE ESPAÑA MINISTERIO DE ECONOMÍA Y COMPETITIVIDAD Instituto de Salud Carlos III</p>	<p>EXPRESSION OF INTEREST</p> <p>2015</p>
<p>Subdirección General de Evaluación y Fomento de la Investigación</p>	

**STRATEGIC ACTION FOR HEALTH RESEARCH (AES)
PERSONALIZED MEDICINE PROJECTS CALL**

Application Number: Principal Investigator:

Project Title:

Organisation/Institution beneficiary:

Company/industrial partner interested in the project (Please include the VAT/CIF number):

The company/industrial partner is interested in the following project's outcomes:

Partner's contribution to the development of the project:

Legal relationship with the project:

I hereby declare, to all its effects and purposes, that the information given on this form is accurate and complete:

Legal representative signature:

Place

, Date

2015

Signed:

Please print, sign and attach this document to the application proposal.