**DECLARATION OF HONOUR**

I, the undersigned**………………………………….. (your full name with bold, capital letters)**, student of **……………………………………… (the full English name of your university)**, who will spend his/her Erasmus+ scholarship from **……………. (DD/MM/YYYY)** to **……………. (DD/MM/YYYY)** at Károli Gáspár University (KRE), hereby **certify** that all data provided in the Incoming Survey of KRE correspond to the reality.

I authorise The University to collect and handle personal information about me in accordance with the General Data Protection Regulation (GDPR) of the European Union effective 25 May 2018.

And also **acknowledge** that:

* I was informed that Károli Gáspár University will send the Official *Letter of Acceptance* by e-mail
* without the required documents and competencies, KRE can reject my application

Name of your city, date (DD/MM/YYYY)

Signature

Your full name