



DECLARATION OF ADDITIONAL MERITS.

For professionals who need to complement the experience.

D / Mrs. _____ with identity card number _____ with
residence in _____ Town _____ CP _____
Country Province _____.

1. Additional Merits according to the AEPD-DPD Scheme (Annex I):

	Merits	Start date	End date	Observations (place degrees, certifications or whatever corresponds according to the AEPD-DPD scheme)
1				
2				
3				
4				

** As many rows as required can be added.*

I certify that I have the documents that certify the declared information, which I make available to ANF accompanying this document. I know and accept that said documentation is an unavoidable requirement for the assessment of the prerequisites for the purposes of the DPD Certification, and is ANF AC's authority to determine its sufficiency in due course.

This document and your personal information is attached to the certification request.

On _____, on ____ of _____, 2019

Signature of the declarant: