**Appendix 1b/2b – Signature Page – First Year / Mid Term Report**

**Project title:**

**Name of Responsible Institution:**

**Project Coordinator:**

**DFC file number:**

By signing, the Responsible Institution and Project Coordinator hereby confirm, that the information and data given in the First Year / Mid Term Report, including appendices, are correct.

|  |  |
| --- | --- |
| *Head of Responsible Institution* |  |
| **Date:** | **Printed name:** | **Signature:** |

|  |  |
| --- | --- |
| *Project Coordinator*  |  |
| **Date:** | **Printed name:** | **Signature:** |