## STATEMENT

Name:	
Email:	Telephone number:
Identification card number:	
Title of dissertation □ /thesis □	
Adviser(s):	
	Year of completion:
Designation of the Master's degree or Field of the Doctor	prate:
	nd its agents a non-exclusive licence of the digital format of my make accessible, particularly through its institutional repository,
I hereby authorise the University of Minho to file more form or medium without altering its content for preserva	than one copy of the thesis or dissertation and convert it to any ation and accessibility purposes.
I retain all copyrights pertaining to the thesis or disserts or books).	ation, and the right to use it in future works (such as articles
I agree to placing my thesis or dissertation in the repos 1. ☐ Immediate Availability of whole work for world	
2.   Availability of whole work for exclusive access	s at the University of Minho for a period of
☐ 1 year ☐ 2 years or ☐ 3 years, after which 3. ☐ Availability of whole work for exclusive acces:	
University of Minho, / /	
Signature:	