**APPENDIX III**

**LETTER OF CONSENT FROM THE COORDINATION OF THE**

**GRADUATE PROGRAM**

**(fill in with the requested information and remove the parentheses)**

To the General Coordination of Education at Fiocruz,

The Coordination of the Graduate Program in (name of the postgraduate program) of (name of the Fiocruz unit) hereby declares institutional support and consent to the Plan of Activities entitled “(project title)” submitted to the Call nº03/2023 – Doctor with Experience Abroad – Modality (Post-Doctorate or Young Talent), proposed by the professor prof. (name of the proposing professor) to receive the candidate (name of the candidate).

The plan of activities to be carried out in the (title of the department or laboratory) of the (name of the unit or institute), from (month/year of beginning of activities) to (month/year of end of activities), presents potential for strengthening the interaction between Fiocruz and foreign strategic institutions and generating positive results that impact teaching and research at Fiocruz.

Yours sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name, signature and stamp of the PPG coordinator