



## SIGNATORY LETTER

Please read the statement below and complete where indicated.

### Application Statement

I hereby declare that all information given in this application is exact and complete. I understand that any statement in this application which proves to be untrue or purposely misleading will render the application void and that if inaccuracies are highlighted at a later stage, Glion retains the right to retract any offer made or expel the student with no refund of fees.

I agree to abide by the totality of Glion regulations, policies and procedures governing admission, enrollment and my studies at Glion, as they may be revised from time to time, including those related to academic life, student life and residency and finance. I understand that the fees and other financial conditions are revised once a year and I accept their revision. I agree that any financial information or any information related to my studies that has a financial impact may be shared with my parent / legal guardian and / or sponsor.

I consent to the storage and processing of the data contained herein by Glion under the provision of the 1992 Federal Act on Data Protection.

I hereby declare to abide by the Swiss law in case of a dispute related to the interpretation or to the execution of my legal obligation towards Glion and accept the exclusive competence of the Vaud and/or Fribourg Cantonal court.

I have read and understood the above conditions and accept them in full.

Name of the Applicant \_\_\_\_\_

Signature of the Applicant \_\_\_\_\_

Date

Signature of the Parent/Legal Guardian \_\_\_\_\_  
(if applicant is under 18 years old)