**CubeSat Portugal**
Academic Institution Participation Letter

# ***[Team Name]***

Date: DD/MM/YYYY

CubeSat Portugal

Portugal Space – Portuguese Space Agency

Palácio das Laranjeiras

Estrada das Laranjeiras, 205, RC, 1649-018 Lisboa

PORTUGAL

To Whom it may concern,

I hereby declare that the following students (including students recently graduated but enrolled in the 2023/2024 academic year) and advisors will be participating in the CubeSat Portugal Challenge that will occur between 2024 and 2027.

* [Students]
* [Advisors]
* Team Leader full name:

Signature: Date:

[Name (it must be a senior university representative)]

[Position (at university)]