

SWORN STATEMENT

(For visiting scholars)

I, ……………………….. ,

*First Name – Last name - status*

employed by ,

*Employer*

hereby declare on my honour that I shall recieve no funding from my current employer/institution for my travel or lodging regarding my participation to the workshop « Journeys across the realm of the Dead : Narratives, ritual and images» that will take place in Inalco, Paris, from

*Date and signature*