### Section 1. Identifying Information

1. Given Name (First Name)  
   GUSTAVO  
2. Surname (Last Name)  
   HAWES  
3. Date  
   OCT 27, 2013  
4. Are you the corresponding author?  
   ✔ Yes  ☐ No  
5. Manuscript Title  
   CAMBIO EDUCATIVO EN LAS FACULTADES DE MEDICINA  
6. Manuscript Identifying Number (if you know it)  

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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  
☐ Yes  ✔ No

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