

Notice	of Recru	itment	(indicate the reference number):

APPLICATION FORM

(to be completed preferably by **electronic** way or in CLEAR capital letters using **black ink**)

	РО	SITION APPLIED FOR	₹:					
	Temporary Agent - grade:							
	PREFERRED COMMITTEE to work in: (to complete this section, please read point I and II of the current notice of vacancy)							
1.		NAME ¹ :	IE ¹ : Forenames:					
	ADDRESS: Home (all correspondence will be sent to this address. Please notify us immediately of any change of address)			tel .number: Work tel. number:				
						Work tel. number:		
	Street:		N°	. Nº:		Mobile phone:		
	Post o	code:Town:			Cou	ntry		
	E-ma	il address:						
3.	DATE AND PLACE OF BIRTH:							
1.	PRESENT NATIONALITY (if dual indicate both):							
	KNOWLEDGE OF LANGUAGES: (to complete this section, please read point III.B.2. of the current notice of vacancy) a) Mother tongue:							
	2,20							
ery go	ood							
ood								
air	a) O45	han language						
	c) Otr	her languages:						
ery go	ood							
ood								
air								

`@Ub[iU[Y`W\cgYb`Zcf`h\Y`kf]hhYb`UbX`cfU`hYghg.``

V@Á; læÁc^•ó, ã/Ás^Áneld ã Ãò} * [ã @ The written testÁwill be held in English or in the other language of choice if English is the first language.

Ú|^æ•^Á§;åå&&æe^Á[``¦Á;¦^-^¦^}&^KÁ

¹ IMPORTANT : Your application will be registered under this name. Please use it and quote the number of the notice of vacancy in all correspondence. Any other name (e.g. maiden name) on diplomas or certificates accompanying this application should be indicated here:

 $\hat{\mathbf{l}}$. **STUDIES** (attach photocopies of diplomas and certificates you need to qualify as a candidate):

A. Secondary, advanced or technical education				
Name and address of establishment (town and country)	Years of from	of study to (1)	Certificates and/or diplomas obtained. State official length of course and main subjects	
B. Higher education				
Name and address of University or other establishment (town and country)	Years of study from to (1)		Certificates and/or diplomas obtained. State official length of course and main subjects	
establishment (town and country)			and main subjects	
Post graduate education				
Name and address of University or other	Years of study		Diploma or other qualification obtained	
Name and address of University or other establishment (town and country)	from	to (1)	Diploma of other qualification obtained	

⁽¹⁾ State the date (month and year) when the studies were completed and/or the qualification was obtained.

PROFESSIONAL EXPERIENCE (attach photocopies of supporting documents)
Give details of the post(s) you have held hitherto and professional experience acquired. Continue on additional sheets if necessary. From Length Exact designation of post, Nature and tasks description (day/month/year) Name and address (day/month/year) (year, month, day) of employer Full/part-time Reasons for leaving: Full/part-time Reasons for leaving: Full/part-time Reasons for leaving: Full/part-time Reasons for leaving:

Please put additional professional experience on separate page.

				·	·	
					Full/part-time	
Reasons for leaving:						
TOTA	L professional experien	ıce:			.//	
` -==ıor				(уу	/ mm / dd)	
Ke	E SKILLS: eyboard normally used: AZEF nowledge of IT software:	RTY QWE	RTY			
	- <u></u>	- <u></u>				
· BUBLIE	UED MODICO (indicate works relever		Second addition	-! -hi-).		
J. PUBLISI	HED WORKS (indicate works relevan	it to the post being applied ior, ii	r necessary add addition	ai sheets):		
1€. Long p	periods (longer than two months) s	pent abroad (please indicate co	untry, year and reasons	for stay):		

1F.	OPTIONAL: Have you special needs that might pose difficulties during the tests? Yes No If yes, please give details (to enable the Administration to make the necessary arrangements, if it can):
1G	Have you ever been found guilty of any offence by a court or tribunal? If so, give details:
	DECLARATION
1	. I, the undersigned, do solemnly declare that the information contained in this form is correct and complete.
2	2. I further do solemnly declare that:
	a) I am a European citizen and enjoy my full rights as a citizen;
	b) I have fulfilled any obligations imposed on me by the laws concerning military service;c) I meet the character requirements for the duties involved.
3	3. I am aware that the following supporting documents (photocopies) will be requested of me and are indispensable if my application is to be accepted:
	a) document proving citizenship (passport or identity card);
	b) diploma(s) or certificate of study certifying the level required for admission to the competition;c) Certificate(s) from employer, or employment contract(s) and the final salary slip(s).
4	I undertake to produce on request supporting documents in respect of point III B, points 1, 2 and 3, and I understand that any misstatement or omission, even if unintentional, may lead to the rejection of my application.
5	i. I agree to undergo the compulsory medical examination to ensure that I am physically fit to perform the duties involved.
Date	e and signature:
Num	nber of endosures::

DO NOT FORGET TO SIGN!

Please note that the Greens/EFA Group will process your data in accordance with the Regulation (EC) $N^45/2001$ on the protection of individuals with regards to the processing of personal data by the Community institutions and bodies. You have the right to access or rectify data.