# Traineeship Period

**September 2020 – July 2020**

# Select an area

Choose an item.

# Personal Data

|  |  |
| --- | --- |
| **Surname** |       |
| **Forename** |       |
| **Gender** | [ ]  Male [ ]  Female |
| **Current Nationality**  | Choose an item. |  | Specify       |
| **Date of Birth** | Click here to enter a date. |

# Contact details

Please notify us of any change of address.

|  |  |
| --- | --- |
| **Street/n°** |       |
| **Postcode** |       |
| **Town** |       |
| **Country** | Choose an item. | Specify       |
| **Telephone** |       |
| **Email address** |       |

# Education (University, post-university or equivalent education)

Please, give exact dates:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name and location of university** | **From/to(months and years)** | **Diplomas or degrees obtained** | **Main subjects** |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |

# Professional Experience (Outside EU Institutions and Bodies)

Please add rows if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of employer** | **From** | **To** | **Type of work** |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |

# Professional Experience (Inside EU Institutions and Bodies)

Please add rows if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of employer** | **From** | **To** | **Type of work** |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |
|  |       |       |       |

# Studies or Published Works on European Topics

Please indicate the subject:

# Languages

|  |  |
| --- | --- |
| **Mother Tongue :** |  |

Please, indicate your level of knowledge using the boxes below:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Languages** | **C2** | **C1** | **B2** | **B1** | **A2** | **A1** |
|       |[ ] [ ] [ ] [ ] [ ] [ ]
|       |[ ] [ ] [ ] [ ] [ ] [ ]
|       |[ ] [ ] [ ] [ ] [ ] [ ]
|       |[ ] [ ] [ ] [ ] [ ] [ ]

# Computer Skills and Competences

# Previous In-Service Training in EU Institutions

Have you already benefitted from an in-service training in another European Institution or body?

[ ]  YES [ ]  NO

# Disabilities

Have you a physical disability which may require special arrangements to be made if you are recruited?

[ ]  YES [ ]  NO

If yes, please give details on the nature of the special arrangement you believe would be necessary.

# Declaration

I declare that the information provided above is true and complete. I realise that any false statement or omission, even if unintentional on my part, may lead to the rejection of my application.

**By writing my name in “signature” below, I acknowledge that I have carefully read the “Rules governing traineeship period at ERA” and I acknowledge receipt and full acceptance of all of them.**

Date:       Signature:

# Checklist

Checklist of supporting documents to accompany the application:

|  |  |
| --- | --- |
| **Document** |  |
| **Copy of passport or National I.D.** |[ ]
| **University Degree (if applicable)** |[ ]
| **Official declaration or transcript from the University (if applicable)** |[ ]
| **Motivation letter** |[ ]

**Personal Data Protection**: The Personal Data requested above are confidential and will be processed solely for the purposes of the traineeship scheme and the selection of trainees, according to the Regulation (EC) n° 45/2001.

You are strongly encouraged to read the relevant “Privacy Statement” found on this website before filling up this Application Form.