

ANNEX I: APPLICATION FORM

IMPORTANT:

- Applicants are required to fill out the **fields below** with the **estimation of points** for each merit, according to the evaluation criteria described in the call (see p. 4 SEVENTH.- EVALUATION CRITERIA).
- All merits reflected in this application form must be **duly certified by the corresponding supporting documents**, and be numbered and submitted in the order listed in the form. **Any merits not accredited by appropriate documentation will not be evaluated.**
- Please note that the **Curriculum Vitae** in Europass format and **Copy of ID card or passport** will be considered **items 1 and 2** of the list in Annex II.

INTERNSHIP APPLIED FOR

Post reference	EU Projects Office Internship Brussels
Requested position	INTERNSHIP AT THE CEIA3 INTERNATIONAL PROJECTS OFFICE IN BRUSSELS

PERSONAL INFORMATION

ID/Passport #		Family name		First name	
Date of Birth		City of birth		Nationality	
Address for notifications				City	
Province		Post Code		Telephone	+ ()
E-mail					

1.- ACADEMIC DEGREES

MAIN DEGREE			
Degree Title	University	Doc. Nº	Points
OTHER OFFICIAL DEGREES			
Degree Title	University	Doc. Nº	Points

2.- TRAINING COURSES

COURSE TYPE: MASTER'S, EXPERT AND UNIVERSITY SPECIALISTS							
Course Title	University	Course Type	Start Date	End Date	Credit Hours	Doc. Nº	Points
OTHER COURSES DIRECTLY RELATED TO POST PROFILE							
Course Title	University	Course Type	Start Date	End Date	Hours*	Doc. Nº	Points

Note: Courses with no indication of number of credits or hours will not be evaluated.

3.- RTD PROJECTS MANAGEMENT EXPERTISE

Project Name	Acronym	EU Program	Applicant Role	Start Date	End Date	Doc. Nº	Points

4.- PREVIOUS WORK EXPERIENCE

Category	Activity	Entity/ Company	City/ Country	Start Date	End Date	Doc. Nº	Points

5.- LANGUAGES

Language	Level (C1+ Or Native/Bilingual)	Official Title	Date obtained	Doc. Nº	Points

6.- OTHER MERITS *(Please indicate any merits, not covered in previous sections, directly related to the profile of the requested post)*

Category	Activity	Entity/Company	City/ Country	Start Date	End Date	Doc. Nº	Points

The undersigning applicant, **Mr./Ms.** _____

HEREBY DECLARES, under sole responsibility, the veracity of the information contained in this application and meets the requirements of the call. The application is submitted with the supporting documents listed below providing evidence of the experiences and qualifications.

In _____, on _____, 2017

(Applicant name signature)

LIST OF DOCUMENTS

List of supporting documents, numbered and listed according to Annex I

Nº	DOCUMENT	Points
1	CURRÍCULUM VITAE	
2	COPY OF IDENTITY CARD OR PASSPORT	
TOTAL POINTS		