

ACER Graduate Programme ACER/GRADUATE/2023/OC

APPLICATION FORM

[Please fill all the fields in ENGLISH]

1. APPLICANT'S PERSONAL DATA

Surname			Forename(s)	
Maiden name				
PRESENT NATIONALITY				
Gender	☐ Male	Female		

Date of birth		
Place of birth	COUNTRY OF BIRTH	

2. PERMANENT ADDRESS AND CONTACT DETAILS

Street/N°		
Postcode/Zip		
Town/Province	Country	

Telephone	Mobile phone	
Email address		

3. Please clearly indicate below the Team/Profile of your choice.

	Team/Profile
1.	Data Analysis
2.	Human Resources

4. EDUCATION AND TRAINING (add fields as necessary).

Please enclose a copy of your university diploma when sending in your application.

Dates	From:	To:	
TITLE OF QUALIFICATION AWARDED			
NAME AND TYPE OF ORGANISATION			
Level of degree			
Location			
PRINCIPAL SUBJECTS AND ORGANISATIONAL SKILLS COVERED			

Dates	From:	To:	
TITLE OF QUALIFICATION AWARDED			
NAME AND TYPE OF ORGANISATION			
Level of degree			
LOCATION			
PRINCIPAL SUBJECTS AND ORGANISATIONAL SKILLS COVERED			

5. PROFESSIONAL EXPERIENCE

a) Have you already worked for a European Institution or Body?

□ Yes □ No

b) Please list all your professional and traineeship experiences. (add fields as necessary)

Dates	From:	To:			
NAME OF EMPLOYER					
TYPE OF EMPLOYMENT	Paid trainee	Unpaid trainee	□ Voluntary work		
	Permanent employee	Temporary employee	Self-employed		
	Other:				
Description (Max 100 words)					

Dates	From:	To:		
NAME OF EMPLOYER				
TYPE OF EMPLOYMENT	Paid trainee	Unpaid trainee	□ Voluntary work	
	Permanent employee	Temporary employee	Self-employed	
	Other:			
Description (Max 100 words)				

6. Skills and Competences

COMPUTER SKILLS	
TECHNICAL SKILLS AND COMPETENCES	
COMMUNICATION AND ORGANISATIONAL SKILLS	
OTHER RELEVANT SKILLS	

7. KNOWLEDGE OF LANGUAGES

Please use the following self-assessment scale (*) to indicate your level of knowledge:

Language	Mother tongue(s)	C2	C1	B2	B1	A2	A1

(*) Common European Framework of Reference (CEF) level

8. ADDITIONAL PERSONAL INFORMATION

Do you have a physical disability that may require special arrangements to be made if you are chosen?

□ Yes □ No

If **YES**, please give details and indicate the nature of the special arrangements you believe would be necessary (1 page maximum):

9. MOTIVATION LETTER (Max 250 words)

Please justify your application and interest in the Graduate Programme and provide any additional relevant information

Declaration

\Box I certify that the statements made by me in answer to the above questions are true,
complete, and correct to the best of my knowledge and belief. I understand that any false
statements or any required information withheld from this form may provide grounds for my
exclusion from the Graduate Programme or cancellation of my training if my application
has been accepted.

□ I enclose a copy of the university diploma

Date:_____ Signature:_____