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| *Complete the application form in* ***English****. It is in your interest to write legibly. Extra pages may be attached in the same format if necessary.*  ***Note: You may decide to submit your CV in your preferred format. However, make sure that all information requested in this form is included.*** |  | | | | | | *Please attach* ***recent*** *passport-type photograph* |
| 1. ***Surname*** *(in block capitals)*   ……………………………………………………………………........................ | | | | | *Maiden name*  ……………………………………......................... | | |
| *First Names (in block capitals)*  ……………………………………………………………………………………………………………………………… | | | 1. ***Sex***   M / F | | 1. ***Date and place of birth***   …………………………………………………….…………………………………………………..... | | |
| 1. ***Nationality: present***   …………………………………………………………………………………… | | | | | *Nationality: at birth*  ……………………………………………………. | | |
| *If you possess any other nationality give details:*  …………………………………………………………………………………………………………………………………………..… | | | | | | | |
| *Passport No.*  ………………………………………………... | | issued on  ……………………………….. | | | | by  ……………………………………………………. | |
| 1. ***Address*** *(in block capitals)*   ……………………………………………………………………………………  ……………………………………………………………………………………  ……………………………………………………………………………………  …………………………………………………………………………………… | | | | | | *Telephone No.:*  ……………………………….................................  *E-mail:*  …………………………..………………………... | |
| 1. ***Civil status :*** single –married – other (specify)   …………………………………………………………………………………………………………………………………………..… | | | | | | | |
| 1. *NALAS Knowledge Manager*   A*. Do you have previous experience of a similar post?* | | | | Yes / No | | | |
| B. *How did you learn of the vacancy? Association, NALAS website, Eurobrussels Newsletter, Devnetjobs website, other websites, other ?*  …………………………………………………………………………………………………………………………………………..… | | | | | | | |

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| 1. ***Particulars of Education***   A. *Higher Education* | | | | | | | | | | | | | | | | |
| *Name, place and country of each university or college* | | | *From* | | | *To* | | *Degrees, Diplomas obtained*  *(state grade/class)* | | | | | | | *State main subjects studied* | |
| ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | | | ……………………………………………………………………………………………………….... | | | ……………………………………………………………………………………………………….... | | ………………………………………...………………………………………..……………………........................................................................................................................................................................................................................................................................................................................................................................................................................................................................................ | | | | | | | …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | |
| B. *Secondary or technical education* | | | | | | | | | | | | | | | | |
| *Names of schools/institutes* | | *Type* | | | *From* | | | *To* | | | *Certificates obtained, examinations passed*  *(state grade/class)* | | | | | |
| …………………………  ……………………………………………............ | | ……………………………….…………….. | | | …………….…………….……………. | | | …………….…………….……………. | | | …………………………………………………………..  …………………………………………………………..  ………………………………………………………….. | | | | | |
| 1. ***Language skills*** *(put your mother tongue first)* | | | | | | | | | | | | | | | | |
| *Languages* | *Reading* | | | | *Writing* | | | | | *Speaking* | | | | *Typing* | | *Shorthand* |
| *Very Good* | *Good* | | *Fair* | Very Good | | *Good* | | *Fair* | Very Goo*d* | | *Good* | *Fair* | *State* *speeds* | | |
| ………………………………  ………………………………  ……………………………… | ……………………………… | ……………………………… | | ……………………………… | ……………………………… | | ……………………………… | | ……………………………… | ……………………………… | | ……………………………… | ……………………………… | ………………………………  ………………………………  ……………………………… | | ………………………………  ………………………………  ……………………………… |
| 1. ***Computers***   *Indicate software you have used*  …………………………………………………………………………………………………………………………………………..…  …………………………………………………………………………………………………………………………………………..… | | | | | | | | | | | | | | | | |

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| 1. ***Details of experience****, with dates (month, year):* S*tart with your latest employment and then give previous ones in reverse chronological order (include traineeship and apprenticeships).* | |
| A. *Current employment* | |
| *From* …………………………………………………  *To* …………………………………………………… | *Description of duties*  *Indicate number and grade of any staff under you* |
| *Exact job title:*  ……………………………………………………….. | ………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….…………………………………………………………………………………. |
| *Name and address of employer:*  ………………………………………………………..  *Sector of activity*:  ………………………………………………………..  *Number of employees*:  ……………………………………………………….. |
| *Gross annual salary:*  ……………………………………………………….. |
| *Availability, notice required*:  ……………………………………………………….. |
| *Reasons why you contemplate leaving:*  ……………………………………………………….. |
| B. *Previous employment (add additional sheet(s) if necessary)* | |
| *From* …………………………………………………  *To* ……………………………………………………. | *Description of duties*  *Indicate number and grade of any staff under you* |
| *Exact job title:*  ……………………………………………………….. | ………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….…………………………………………………………………………………. |
| *Name and address of employer:*  ………………………………………………………..  *Sector of activity*:  ………………………………………………………..  *Number of employees*:  ……………………………………………………….. |
| *Gross annual salary:*  ……………………………………………………….. |
| *Reason for leaving:* ……………………………………………………….. |

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| *Previous employment (add additional sheet(s) if necessary)* | |
| *From* …………………………………………………  *To* ……………………………………………………. | *Description of duties*  *Indicate number and grade of any staff under you* |
| *Exact job title:*  ……………………………………………………….. | ………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….………………………………………………………………………………….…………………………………………………………………………………. |
| *Name and address of employer:*  ………………………………………………………..  *Sector of activity*:  ………………………………………………………..  *Number of employees*:  ……………………………………………………….. |
| *Gross annual salary:*  ……………………………………………………….. |
| *Reason for leaving:*  ……………………………………………………….. |

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| 1. ***Have you any objection to our writing to your previous employers*?** | | | | Yes / No |
| 1. *Are you still liable for any form of* ***national service*** *(military or otherwise)? If so, when and for how long approximately?*   ……………………………………………………………………………………………………………………………………..… | | | | |
| 1. ***Person to be notified in case of emergency****:* | | | | |
| *Name: …………………………………..*  ……………………............................ | | *Address: ………………*……………………. ………………………..................................……………………….................................. | *Tel: ……………………………………………..* | |
| 1. ***State of health*** *(appointment might be subject to a medical examination)*   *Have you ever had a serious illness or accident requiring medical, surgical or psychiatric treatment?*  ……………………………………………………………………………………………………………………………………..…  *If so, please give details and dates*  ……………………………………………………………………………………………………………………………………….. | | | | |
| 1. ***Convictions*** *– Disciplinary measure : State any convictions, disciplinary measures or proceedings pending.*   *(If not applicable reply “none”)*  ……………………………………………………………………………………………………………………………………….. | | | | |
| 1. *Give the names and addresses of three personal* ***referees*** *(other than relatives and your employers mentioned under No.11)*   *IN BLOCK CAPITALS* | | | | |
| *Name* | | *Address and Tel. No.* | *Profession or occupation* | |
| (i) ……………………………………… .…………………………………………  (ii) ……………………………………... .…………………………………………  (iii) …………………………………….. .………………………………………… | | ……………………………………………..……………………………………………..……………………………………………..……………………………………………..……………………………………………..…………………………………………….. | ……………………………………………..……………………………………………..……………………………………………..……………………………………………..……………………………………………..…………………………………………….. | |
| *I certify that the above statements are to the best of my knowledge correct and complete. I note that if after my appointment, it should be found that this is not so, I shall be liable to immediate dismissal* | | | | |
| *Date:* ………………………………… | *Signature of applicant* | | | |