



PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS USING A PC
THE FORM MUST BE FILLED IN ENGLISH

PERSONAL INFORMATION

NAME AND SURNAME : _____

AGE : _____

NATIONALITY : _____

TELEPHONE NUMBER : _____

E-MAIL ADDRESS : _____

SKYPE CONTACT : _____

EDUCATION AND TRAINING

TITLE OF STUDIES : _____

YEAR OF STUDIES : _____

MAIN SUBJECTS STUDIED : _____

NAME OF THE SCHOOL/INSTITUTION : _____

PARTICULAR INTEREST FOR THE FUTURE STUDYING CAREER :

Are you interested in carrying on your studies? If so in which sector? If not, after you finish your school pathway which are your plans and ambitions.



WORK EXPERIENCE

PREVIOUS WORK EXPERIENCE :

Please indicate if you have any previous experiences, if so, where and in which role and with which tasks

PREVIOUS WORK EXPERIENCE :

SECTOR OF WORK EXPERIENCE ABROAD

PREFERRED FIELD OF INTEREST OF THE WORK PLACEMENT ABROAD :

For example: Administration, IT, Gastronomy, Car mechanic, Hairdressing etc.

SPECIFICATIONS OF TASKS ABROAD :

Please indicate which tasks you would like to carry out.

For example: IT sector please specify the area of interest like hardware, web pages etc. - Hospitality sector please specify the area of interest like housekeeping, waiter etc.



SECOND OPTION OF YOUR INTEREST :

Please specify your second option of the work placement sector

THIRD OPTION OF YOUR INTEREST :

Please specify your third option of the work placement sector

PERSONAL SKILLS

MOTHER TONGUE(S) :

OTHER LANGUAGE(S) :

Fill in according to the level of the Common European Framework of Reference for Languages so, A1/A2: Basic user - B1/B2: Independent user - C1/C2 Proficient user

	UNDERSTANDING		SPEAKING		WRITING
	listening	reading	spoken interaction	spoken production	



ENGLISH					
GERMAN					
ITALIAN					
SPANISH					
OTHER:					
OTHER:					

IT SKILLS :

Please indicate your IT skills and IT programmes you know

HOBBIES :

Please tell us a little about your hobbies, interests

ANNEXES

Add at your convenience: Cover Letter – Certificates – Others

STUDENT DECLARATION

In compliance with my national legislation, I hereby authorize you to use and process my personal details contained in this document by one of the Agencies part of ETN.

DATE: _____