

INTERNSHIP APPLICATION FORM

I. Personal Data			
1. Family name (surname):		2. First name (given name):	
3. Gender (M/F):	4. Date of birth dd/mm/yy):	5. City/ country of birth:	6. Present nationality
7. Nationality at birth:	8. Present address:		
8a. Telephone:	8b. Fax number:	8c. E-mail address:	
9. Permanent address:			

II. Emergency Information	
10. Family name (surname):	11. First name (given name):
12. Relationship to applicant:	13. Address/ telephone:

Please type in English (reference to the curriculum vitae is not sufficient).

III. Education, employment and personal skills information

Higher education (college/ university):

Clearly state the title of the degree(s), the exact starting date and the date when the degree(s) of the current program will be obtained. Proof of enrolment in a second university-level program (for instance, a Master's Degree program) or higher education (for instance, a Ph.D. Program) during the requested internship period may be required at a later stage in the selection process.

14. Current education:

Institution Name, city, country	Dates of attendance		Degree(s) (to be) Obtained (m/y)	Major subject(s) of study
	From m/y)	To (m/y)		

15. Completed education:

16. Computer skills: Word-processing Spreadsheet Database (data input)
 Web page design Power Point Other:
 Internet research Database (design)

17. Publications (if any):

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18. Knowledge of languages:

	Read		Write		Speak	
	Easily	Not easily	Easily	Not easily	Easily	Not easily
Mother tongue*:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other*:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other*:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Please specify

IV. Internship information

Please indicate, in order of preference, three main areas in which you would like to be considered for an internship. If you have specific wishes concerning the actual work assignment, if selected to intern at CCOE, please give a short description and specify it more detailed in your essay.

21. Preferred work assignment:

Working area	Short description of preferred assignment

22. Requested dates for Internship:

From: _____ To: _____

23. I hereby certify that the foregoing statements and answers are true, complete and correct to the best of my knowledge and belief and can be verified at any time. I have read the Conditions of Internship and agree to abide by them if selected to intern at CCOE.

Signature: (when applying by e-mail, type your name)

Date:
(dd/mm/yy)

Please e-mail this form as well as an electronic version of your CV and a short motivational essay (150-250 words) as attachments to registry@cimic-coe.org, preferably in MS Word or PDF file. Applications may also be faxed to +31 (0) 15 28 44714 or mailed to the following address:

P&C Branch
CIMIC Centre of Excellence
PO-Box 90701
2509 LS The Hague
The Netherlands