

Application form details

JOB VACANCY INFORMATION

Job vacancy title Expert

Job vacancy code Cedefop/2014

Protocol number TEST/201408_IGNORE-115001

PERSONAL INFORMATION

Title: Mr

Surname: Schmidt

First name(s): Peter

Other name(s)

Address: Europe123

Post code: 55102

City: Thessaloniki

Country: Greece

Telephone: +30 23 10 49 01 11

Mobile: +30 69 11 11 11 11

Email 1: hr-recruitment@cedefop.europa.eu

Email 2:

Nationality 1: German

Nationality 2:

Date of Birth: 08/02/1973

Gender: Male

How did you learn about this selection procedure? Cedefop's website

EDUCATION AND TRAINING

Degree giving access to this selection procedure obtained on 03/08/1998

Education level retrieved Post-secondary diploma

Title of the degree: Bachelor

Name of the awarding body: University of Bonn

KNOWLEDGE OF LANGUAGES

Mother tongue Croatian

Language	Understanding	Speaking	Writing
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	Listening	Reading	Spoken interaction	Spoken production	
German	C2	C2	C2	C2	C2
English	C1	C1	C1	C1	C1
Greek	B2	B2	B2	B2	B2

WORK EXPERIENCE

From	To	Type	%	Total	Name of employer	Job title
01/09/1995	30/09/2000	Part-time	50	2 year(s) 6 month(s) 16 day(s)	ckouf	Expert

TRAINEESHIPS

From	To	%	Paid	TOTAL
01/10/2000	25/08/2014	100	Yes	13 year(s) 10 month(s) 25 day(s)

MILITARY SERVICE

Are you obliged you personally to do military service (Y/N)? No

If yes, have you completed it?

If yes, dates of service:

From

To

Total

DOCUMENTS

CV [TEST CV.txt](#)

Diploma and certificate [TEST diploma.txt](#)

Motivation letter [TEST letter.txt](#)

DECLARATION

- I declare on my word of honour that the information provided above is true and complete
- I further declare on my word of honour that:
 - ☐ I am a national of one of the EU Member States;
 - ☐ I have fulfilled any obligations imposed on me by laws concerning military service
 - ☐ I meet the character requirement for the duties involved.
 - ☐ I have not been deprived of my civic rights
- I undertake to produce, as soon as requested, supporting documents in respect of this application and accept that failure to do so may invalidate my application
- I am aware of the fact that my application will be refused if I fail to submit copies of the following documents:
 - ☐ proof of nationality (passport, identity card, birth certificate etc.)
 - ☐ diploma(s) or certificate(s) required for admission to the selection procedure
 - ☐ statements of previous employment or contract(s) clearly specifying starting and end dates and for the current position proof of the start date, continuity and the latest payslip
- I am willing to undergo the prescribed medical examination prior to appointment.
- If recruited, I undertake to sign a declaration of commitment to act independently in the public interest and to declare any interests that might be considered prejudicial to my independence.

Please confirm you agree to the declaration above and enter your name in the boxes below.

☒ I confirm the information declared on this application is accurate to the best of my knowledge and I consent to my details being stored electronically

Name P.Schmidt

Date 26/08/2014

☐ I wish to be informed through email of future vacancies