

<Name>

<Company>

<Address>

<City>

<Country>

 <day Month> <year>

Please fill in the information below electronically, as directed.
Delete any unused rows / parts of the application or add more space if required.
**All sections are mandatory unless indicated otherwise and must be complete.**

**ECDC Fellowship Application**

**VACANCY TITLE** ECDC Fellowship

Where did you see this position advertised? Choose an item. If 'other' please specify here:

# PERSONAL INFORMATION

Family name(s): Click here to enter text.

First name(s): Click here to enter text.

Date of birth: Click here to enter text.

Gender: Choose an item.

Nationality/ies: Click here to enter text.

# CONTACT INFORMATION

Current address including city, country and postal code:

Click here to enter text.

Mobile phone (incl. country code): Click here to enter text.

Alternative phone (optional): Click here to enter text.

Email address: Click here to enter text.

**EDUCATION (starting with most recent)** – add/delete rows as required

|  |  |  |  |
| --- | --- | --- | --- |
| From (DD/MM/YY) |  To (DD/MM/YY) |  Title and subject of qualification awarded | Name and address of education establishment |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

**CERTIFIED TRAINING** (optional – add/delete rows as required)

|  |  |  |  |
| --- | --- | --- | --- |
| From (DD/MM/YY) | To (DD/MM/YY) | Title of Qualification Awarded | Name and address of training establishment |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

## WORK EXPERIENCE (starting with current or most recent employer)

|  |  |  |
| --- | --- | --- |
| From (DD/MM/YY) | To (DD/MM/YY) | Position Held / Job title |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Name and address of employer: Click here to enter text. |
| Full-time or part-time**:** Click here to enter text. | Percentage of time worked (i.e. 100% / 50%): Click here to enter text. |
| Was this employment/activity paid:  |  (yes or no) |
| Description of main tasks / duties / responsibilities:Click here to enter text. |

|  |  |  |
| --- | --- | --- |
| From (DD/MM/YY) | To (DD/MM/YY) | Position Held / Job title |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Name and address of employer: Click here to enter text. |
| Full-time or part-time**:** Click here to enter text. | Percentage of time worked (i.e. 100% / 50%): Click here to enter text. |
| Was this employment/activity paid:  |  (yes or no) |
| Description of main tasks / duties / responsibilities:Click here to enter text. |
|  |
| From (DD/MM/YY) | To (DD/MM/YY) | Position Held / Job title |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Name and address of employer: Click here to enter text. |
| Full-time or part-time**:** Click here to enter text. | Percentage of time worked (i.e. 100% / 50%): Click here to enter text. |
| Was this employment/activity paid:  |  (yes or no) |
| Description of main tasks / duties / responsibilities:Click here to enter text. |
|  |

(add additional employers here if required - copy and paste from the above table template - otherwise delete any unused sections)

# LANGUAGE SKILLS

Click here to enter text.

Mother tongue(s):

**OTHER LANGUAGE(S)** - add/delete rows as required:

Choose the right level for each skill:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Understanding** | **Speaking** | **Writing** |
| Listening | Reading | Interaction | Production |
| Click here to enter text. | e.g. B1 |  |  |  |  |
| Click here to enter text. |  |  |  |  |  |
| Click here to enter text. |  |  |  |  |  |

For a detailed description of the CEFR levels please use the following link: Common European Framework of Reference for Languages

**SKILLS IN SOFTWARE** - relevant for epidemiology, biostatics and microbiology (Stata, R, GIS, BioNumerics, MEGA, etc.)

|  |  |
| --- | --- |
| Click here to enter text. | Choose an item. |
| Click here to enter text. | Choose an item. |
| Click here to enter text. | Choose an item. |
| Click here to enter text. | Choose an item. |
| Click here to enter text. | Choose an item. |

**LIST OF PUBLICATIONS & ADDITIONAL INFORMATION**

Please enter any additional information here; for example, a list of publications, starting with peer reviewed published/accepted, using the following format: All authors. Title. Journal, Year (e.g., Vancouver style), or additional projects, volunteer work, professional networks, awards, etc. If not required, please delete this page.

**LETTER OF MOTIVATION (required)**

Please provide an explanation (maximum 1 page) of why you are applying to the Fellowship. Include an account of your experience, expertise, knowledge, and skills that you feel are relevant to the requirements listed in the call for application.

**IMPORTANT**

## Your application will only be considered if submitted electronically, in full, prior to the application deadline stated in the Vacancy Notice.

By submitting this application, I, the undersigned, declare that the information provided above is true and correct. I further declare that:

I will undertake to submit documents in support of the above statements and declarations if requested to do so.

I understand that any false statement or omission in the ECDC application, even if unintended on my part, may lead to the termination of my application or appointment.

I have read and accept the conditions set out in the call for application, Administrative Decision and any other documents relevant to this selection which have been published on the ECDC website.

­

**TYPE NAME AND DATE HERE AS SIGNATURE**