SELECTION OF CONTRACT STAFF   
APPLICATION FORM

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| **Call for interest reference: ESTAT/LUX/2024/CA/405660** | | |
|  | | |
| **You must fill in the application form in its entirety. Failure to do so may result in your application being rejected. Please complete the form in English.** | | | | | | | | |
| Click to enter Surname | | | |  | Click here to enter First Name. | | | | |
| **Surname** | | | |  | **First name** | | | | |
| Click to enter Country of birth. | |  | Click to choose a date. | | |  | Click here to enter nationalty. | | | |
| **Country of birth** | |  | **Date of birth** | | |  | **Current nationality** (If dual, indicate both) | | | |
| **Eligibility / Selection Criteria** | | | | | | | | | | |
| I have a degree attested by a diploma or a level of secondary education attested by a diploma giving access to post-secondary education, and appropriate professional experience of at least three years. | | | | | | | | | Yes  No | | | |
| I am registered in the open database, [CAST Permanent](https://epso.europa.eu/en/job-opportunities/open-for-application) for a CAST profile | | | | | | | | | Yes  No | | | |
| After having obtained my diploma, I have at least 1 year of full-time relevant professional experience | | | | | | | | | Yes  No | | | |
| I have a first language: minimum level C1 in one of the 24 official EU languages[[1]](#footnote-1) | | | | | | | | | Yes  No | | | |
| I have a second language: minimum level B2 of a second official EU language | | | | | | | | | Yes  No | | | |
| I meet the appropriate character reference as to my suitability for the performance of my duties | | | | | | | | | Yes  No | | | |
| I have fulfilled any obligations imposed on me by the laws on military service *– please indicate N/A if you are not subject to a compulsory military service in your Member State* | | | | | | | | | Yes  No  N/A | | | |
| Have you already been employed by the Commission? If yes, which status (official, contract staff, temporary agent, seconded national expert, trainee, interim staff, service provider)? | | | | | | | | | Yes  No  ………………….. | | | |

**DECLARATION**

I, the undersigned, declare that:

A) the information provided above is true and complete.

B) I am aware that i am expected to produce supporting documents confirming the information given in my application file.

C) I am aware that any false statement may invalidate my application and/or, where appropriate, result in the cancellation of the contract, pursuant to the Conditions of Employment of other Servants of the European Union[[2]](#footnote-2).

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| --- | --- | --- |
| Click to enter a date. |  |  |
| Date |  | name and Signature |

For information related to Data Protection, please see the Specific [Privacy Statement](https://ec.europa.eu/dpo-register/detail/DPR-EC-02054.3) under “7. Information to data subjects on their rights”, to find your rights and how to exercise them in addition to the privacy statement, which summarises the processing of your data.

1. (<https://europass.cedefop.europa.eu/en/resources/european-language-levels-cefr>) [↑](#footnote-ref-1)
2. <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A01962R0031-20140501> [↑](#footnote-ref-2)