

APPLICATION FORM FOR AN INTERNSHIP

(Please write legibly in block letters. Then return completed form to the IUCN-ELC, dated, signed and enclosing all the supporting documents required)

Is this internship an obligatory part of your course? Yes No

(If yes, please attach proof from your educational establishment attesting to this fact)

Date of internship requested: _____

1. Surname: _____ First name: _____

2. Addresses:

| <u>Permanent</u> | <u>Temporary (until)</u> |
|----------------------------|----------------------------|
| (street) _____ | (street) _____ |
| _____ | _____ |
| (City & postal code) _____ | (City & postal code) _____ |
| (Country) _____ | (Country) _____ |
| (Tel) _____ | (Tel) _____ |
| (email or fax) _____ | (email or fax) _____ |
| _____ | _____ |

3. Nationality or nationalities: _____

4. Date of birth: _____

5. Female Male

6. Languages

| Language | Spoken | Read | Written |
|----------|--------|------|---------|
| | | | |
| | | | |
| | | | |

7. Have you already done a (paid/unpaid) internship with another organization (ie. UN, European Union, IGO, NGO)? If yes, please give details:

8. Knowledge of IT software & computer skills (ie. word processing, other):

9. Education:

| <i>Higher education completed</i> | | |
|-----------------------------------|----------------|-----------------------------|
| Name of Institution | Dates attended | Certificate/Degree obtained |
| | | |
| | | |
| | | |

| <i>Present Studies</i> | | |
|------------------------|---------------|---------------|
| Name of Institution | Starting Date | Main Subjects |
| | | |
| | | |

10. Professional experience (if any):

| Posts | | |
|-----------------|--------------|------------------------------|
| Employer | Dates | Description of Duties |
| | | |
| | | |
| | | |

11. Referees:

| Name | Relation to applicant |
|-------------|------------------------------|
| | |
| | |

Please attach a *Curriculum Vitae* (in English).

I hereby declare:

- that the statements and all accompanying documents in this application are true and complete;
- that I understand that any false statement or omission may lead to the cancellation of my application for an internship at the ELC.

Name (*in print*) _____

Signature

Date