

OFFICIAL TRAINEESHIP SCHEME

**INTERNATIONAL
OLIVE COUNCIL**

APPLICATION FORM

Calle Príncipe de Vergara, 154
28002 MADRID



Recent photo
(max. 5 x 5 cm)

1. Application for the traineeship as

Please answer all questions, if necessary stating *none*. Do not cross out or leave any boxes blank. Use block letters. **Remember to sign the form and to attach a photo.**

2. Surname (this application will be registered under this surname, which should be mentioned in all subsequent correspondence)
.....

3. First name(s):
.....

(Please underline the name you are usually known by)

4. Address:
Tel.:
E-mail:
(Any change of address must be notified)

5. Nationality at birth: Current nationality:

6. Date and place of birth (town, region, country):
.....

12. Do you have health insurance for the duration of the traineeship?
.....
If you do, please provide supporting proof.

15. Declaration

I, the undersigned,, hereby declare on my honour that the information provided in this application form is complete, accurate and true.

I likewise give my word of honour that:

- I am a citizen of one of the member countries of the IOC where I enjoy full rights as a citizen;
- I meet the character requirements for the duties entailed in the traineeship.

I undertake to supply, when so requested, supporting proof of the above two points and I understand that failure to do so may result in my application being considered void.

I agree to undergo the statutory medical examination to check I am physically fit to perform the duties entailed in the traineeship.

Date and signature

.....