

THE EUROPEAN OMBUDSMAN



Ref. Number

.....
To be completed by the
administration

OMB/03/2010 - LAWYER-LINGUIST APPLICATION FORM

☐ **Mr.**.....☐ **Ms** ☐ **Dr** ☐ **Prof.**

1. Surname..... **Forename**

2. Nationality..... **Date of birth**

3. Address Street Postcode.....

Town Country

4. Tel...... **Mobile Phone** **E-mail**

5. Education - Diploma which satisfies the requirements set out in Section 5 (a)

Name and location of University	From (Month/Year)	To (Month/Year)	Diplomas obtained	Main subjects	Annex number *

* The reference of a supporting document is compulsory for each line

6. Education - Diploma(s) and certificates obtained after the diploma mentioned above

Name and location of University	From (Month/Year)	To (Month/Year)	Diplomas obtained	Main subjects	Annex number *

* The reference of a supporting document is compulsory for each line

7. Working experience - Start with the most recent

Name of employer	From (Month/Year)	To (Month/Year)	Duration (Months)	Type of Work	Annex number *

Total duration _____ (Months)					

* The reference of a supporting document is compulsory for each line

8. Mother tongue

9. Other languages (EU languages)	Fluent		Very Good		Good		Fair	
	Spoken	Written	Spoken	Written	Spoken	Written	Spoken	Written

10. Have you published any material on EU topics or are you preparing any publications? If so, please list

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I, the undersigned, declare that the information provided above is true and complete. I understand that any false statement / omission or any missing document may lead to the cancellation of my application and that an unsigned application cannot be taken into consideration.

DATE SIGNATURE

Your application must include the following documents:

1. the present application form
2. a letter stating the reasons for applying;
3. a copy of the applicant's curriculum vitae including his/her contact details;
4. a copy of a document proving the applicant's citizenship;
5. copies of degree certificates;
6. copies of evidence of professional experience, clearly indicating the starting and finishing dates and the exact nature of the duties carried out
7. in the case of officials, copies of their three most recent staff reports ;
8. a numbered list of all supporting documents required above

Your application should be sent to:

European Ombudsman's Office
Administration & Personnel Unit
Selection OMB/03/2010
1, Avenue du Président Robert Schuman
CS 30403
67001 Strasbourg Cedex
FRANCE

You are reminded that your complete file should be sent by no later than 15/09/2010

THE EUROPEAN OMBUDSMAN



Administration & Personnel Unit

**Ref. Number of your
application**

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Fill-in with your name and address and send the document back to the Ombudsman

Strasbourg,

Acknowledgement receipt

Dear Sir/Madam,

I am writing to acknowledge receipt of your application, which was sent to the Secretariat of the European Ombudsman in the framework of selection procedure OMB/03/2010.

All applications will be carefully examined and you may be asked to attend an interview. You will be informed of the outcome of the selection procedure as soon as possible.

Details as to the various steps of the selection procedure can be found under section 7 of the call for expression of interests.

Yours sincerely,

Secretariat of the European Ombudsman

The European Ombudsman

1, avenue du Président Robert Schuman – CS 30403 – F-67001 STRASBOURG Cedex

☎ : +33 (0)3.88.17.23.13 – Fax : +33 (0)3.88.17.90.62

<http://www.ombudsman.europa.eu> – eo@ombudsman.europa.eu