

FORM C

Insert
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NAME LAST NAME

Personal Data

Complete Address: (Number, Street name, City, State, and Nation)

.....

Date and place of birth

e-mail:

cell number:

Associative Experience

- Confederation, Federation, Union
- Indicate the periods from to
- Role, titles

Professional Experience

- Nature of employment
- Main duties and responsibilities

Education and training

- Type of education or training institution:
- Qualification awarded:

Language skills

First Language [Indicate the first language]

OTHER LANGUAGES [Indicate the language]

Reading ability

Writing skills

Oral expression skills

Relational Skills and Competences

Living and working with other people, in a multicultural environment, occupying places where communication is essential and in situations where teamwork is necessary (e.g., culture and sport), etc. [Describe these skills and indicate where they were acquired]

Organizational skills

E.g., coordination and administration of people, projects, budgets; in the workplace, in other voluntary activities (e.g., culture and sports), at home, etc. [Describe these competencies and indicate where they were acquired]

Technical skills and competences

Computer skills operating systems (Windows, Android, etc.), software: word, PowerPoint, digital platforms

Use of social media (WhatsApp, Facebook, Twitter, etc.)

Other skills and competences

Skills not previously indicated (hobbies, interests, any other helpful element to convey information on character, personality, and dynamism)

Pursuant to the current regulations on protecting privacy, I authorize the processing of my data as already expressed in the facsimile of the application.

Date

Name Last Name