

LIFE LONG LEARNING LEVEL 2 CENTER OF REGION OF CENTRAL MACEDONIA – REGIONAL UNIT OF SERRES S.A.

Main Offices:

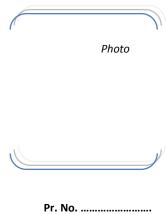
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The Programme is co-funded by the European Union and by National Funds of the Participating Countries





Serres,...../..........

Executive A Application

(COMMUNICATION SUPERVISOR)

For the implementation of project PARK in IPA Cross-Border Programme 'Greece-The Former Yugoslav Republic of Macedonia 2007-2013' with code P3-003-2014

Please fill in the following form with accurate information

LAST NAME:	
FIRST NAME:	
FATHERS NAME:	
DATE OF BIRTH (in numbers):	
GENDER:	MALE 2 FEMALE 2
ID Number:	
ADDRESS:	STR. NUMBER. CITY
TELEPHONE NUMBER:	
	HOME CELLULAR
Email:	
Professional experience as manager on in E.U. Funding Programmes' actions	Yes ? No ?
If 'yes' please describe :	

The IPA Cross-Border Programme "Greece - The former Yugoslav Republic of Macedonia 2007-2013" is co-funded by the European Union and by National Funds of the Participating Countries







Sequence Number	Title / Position	Employer		Duration (From – To)	Duration in months		Document Number
	Specialized experience in E.U. Funded cross-border			Yes ?		No ?	
Programmes' action							
If 'yes' please descri	be :						
Sequence Number	Title / Position	Employer		Duration (From – To)	Duration in month		Document Number
Professional experie	nce on Regional Dev	l elopment acti	ons.	Yes ?		No ?	
If 'yes' please descri	be:			1			
Sequence Number	Title / Position	Employer		Duration (From – To)	Dura	ation in ths	Document Number
Current profession	al status						
Unemployed	?		Civil ser	vant			
		Private S	ivate Sector Employed ☑				
Qualifications:							
Bachelor Degree:							
University-Departr	ment:						
Date received:							
MSc Degree (in rel	evant with the action	n disciplines):	Yes	? No ?			
MSc Title:							
University-Departr	ment:						
Date received:							
MSc Degree (in irrelevant disciplines):		Yes	© No ?				
MSc Title:	mant.						
University-Departr	nent:						
Date received:	ith the action discipl	inocl:		. A. N A.			
PhD (in relevant with the action disciplines): PhD Title:		Yes	© No ?				
University-Departr	ment:						
Date received:	nent.						
			La	nguages:			
English Language :			Yes				
Certificate Title:							
Level:							
			Com	puter Skills:			
Certificate Title:				•			



	Origin		
The Former Yugoslav Republic of Macedonia South-	Yes ?	No 🛚	
East Planning Region origin			

Attached are submitted	the	following	enumerated	documents:
Attached are submitted		I O II O WILLIE	Ciluinciated	accuments.

1.	2.
3.	4.
5.	6.
7.	8.
9.	10.
11.	12.
13.	14.
15.	16.
17.	18.
19.	20.
21.	22.
Note that the documents' validity will be confirmed by Committee in compose a qualification summary for each candidate.	The Former Yugoslav Republic of Macedonia which will

DECLARATION

I hereby declare that the information is true and correct. In case any of the above information is found to be false or untrue or inaccurate, I am aware that I may be held liable for according to the Law 1599/1986.

Candidate Signature	Date

