ERA Application form

Ref. number of the Call for applications: **ERA/AD/2018/001-OPE**

For which field(s) do you apply?

[ ]  Field 1- Railway safety and safety certification

[ ]  Field 2- Railway interoperability and vehicle authorisation

[ ]  Field 3- ERTMS and railway signalling

[ ]  Field 4- Transport data systems

**Reminder:**

Candidates may apply for one, two or three fields.

Candidates shall not be able to change the chosen field(s) after the submission of the ERA Application form.

*Fields where you may enter your input, are highlighted in light blue color!*

# MY PERSONAL DATA:

|  |  |  |  |
| --- | --- | --- | --- |
| Surname (family name): |  | First (given) name: |  |
| Nationality: |  | Date of birth:dd/mm/yyyy |  |
| Address for correspondence: (street, house number, postal code, city, country) |  | Telephone number:(including international prefix) | Home: Mobile:  |
| E-mail address (to be used for communication): | Email 1: Email 2: Make sure that these email addresses are correctly entered and frequently monitored by you as it will be used by ERA to communicate with you regarding your application. |

# MY LANGUAGE SKILLS[[1]](#footnote-1):

This section provides you with an opportunity to indicate your mother tongue(s) and to complete the table below by indicating the appropriate level (from A1 to C2) as explained in footnote1 in any other EU languages.

**Mother tongue(s):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Other EU languages | Understanding (from A1 to C2) | Speaking (from A1 to C2) | Writing (from A1 to C2) | Language Certificate/Diploma/ Date of award |
| **Languages** | **Listening** | **Reading** | **Spoken interaction** | **Spoken****production** |  | **(if available)** |
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# MY EDUCATION AND TRAINING:

**Note: Copy boxes if necessary**

|  |
| --- |
| **Secondary Education or training (in chronological order)** |
| Name of the establishment and country  | Dates from/to: (dd/mm/yy) | Main Subject(s)/occupational skills covered | Title of the qualification in original language and in English | Date of award: (dd/mm/yy) |
|  |  |  |  |  |
|  |  |  |  |  |

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| --- |
| **Post-Secondary Education or training (in chronological order)** |
| Name of the establishment and country | Dates from/to: (dd/mm/yy) | Main Subject(s)/occupational skills covered | Title of the qualification in original language and in English | Date of award: (dd/mm/yy) |
|  |  |  |  |  |
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| --- |
| **University education (in chronological order)** |
| Name of the establishment and country  | Dates from/to:(dd/mm/yy) | Main Subject(s)/ occupational skills covered | Title of the qualification in original language and in English | Date of award:(dd/mm/yy) |
|  |  |  |  |  |
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| --- |
| **Post-Graduate Studies (in chronological order)** |
| Name of the establishment and country  | Dates from/to:(dd/mm/yy) | Main Subject(s)/ occupational skills covered | Title of the qualification in original language and in English | Date of award: (dd/mm/yy) |
|  |  |  |  |  |
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| --- |
| **Other Certificated Education or training relevant for the position you are applying for** **(in chronological order)** |
| Name of the establishment and country | Dates from/to:(dd/mm/yy) | Main Subject(s)/ occupational skills covered | Title of the qualification in original language and in English | Date of award: (dd/mm/yy) |
|  |  |  |  |  |
|  |  |  |  |  |

# MY PROFESSIONAL EXPERIENCE:

Starting with your present or last post, list in reverse order your previous professional experience longer than 3 months which you deem are the most relevant for the post you are applying for. In case you are or you were working for an EU Body, you should also mention your contract type and the respective grade.

**Note: Copy boxes if necessary**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Period of employment(dd/mm/yyyy) | Start date |  | End date |  | Calculated length | (years, month) |
| Organisation – name(including city and country) |  |
| Workload | Full time  | Part time  (………..% ) |
| Type of business or sector |  |
| Job title of position held |  |
| Main activities and responsibilities |  |
| Language(s) used |  |
| Number and type of staff under your responsibility (where applicable) |  |
| Name and contact details of your supervisor (optional) |  |
| Reason for leaving (optional)  |  |

# MY REFERENCES:

This section gives you an opportunity to provide us with the names and contact details of 3 most recent professional-references persons, not related to you, who know you professionally and/or personally; including at least one supervisor who may be later on contacted by ERA to provide professional references on you and/or to confirm statements made by you.

Please note that ERA will only contact the listed persons after your authorization prior to the decision on appointment.

|  |  |  |  |
| --- | --- | --- | --- |
| Name and surname | Relation / position | Email contact + phone number (including international prefix) | Permission to contact (yes/no) |
|  |  |  |  |
|  |  |  |  |
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# MEETING THE SELECTION CRITERIA:

This section provides you with an opportunity to clearly describe in more details how well you meet or exceed professional requirements (please refer to **the selection criteria** listed in **the section III** of the Call for applications). Use real examples/tasks you have performed, goals achieved. These statements are mainly used to assess your suitability for the post. You should be concise. The space for your input is limited to a maximum of 1000 characters per criteria.

Selection Criteria:

|  |
| --- |
|  |

**Note: One box for one criteria, repeat boxes according to the number of criterion**

# MY MOTIVATION LETTER:

This section provides you with an opportunity to explain your motivation for applying for this post and the added value you could offer by any additional information not mentioned in previous sections. The space for input is limited to a maximum 1000 characters.

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# DECLARATION:

I, the undersigned, declare that all the information provided by me above are, to the best of my knowledge, true, correct and and complete on the date of the submission of my application.

I further declare that:

* I am currently a national of a member state of the European Union or the EEA (i.e. Norway, Lichtenstein and Iceland) countries.
* I have not been deprived of my civic rights.
* I have complied with the provisions of all military service laws applicable to me.
* I undertake to submit, as soon as requested by ERA, any documents in support of the above statements and declarations.
* I am fully aware that any false or incorrect statement or omission, even if unintended on my part, may lead to my lower scoring during the evaluation, refusal or non-eligibility or disqualification of my application or may render my appointment with ERA liable to a termination.
* I am willing to undergo the pre-engagement medical examination prior to taking up duty.
* I am willing to provide a cerficate of good conduct prior to engagement.
* I am willing to provide the supporting documents proving my educational background and professional experiences prior to the engagement procedure.
* I am willing to fill in the Agency’s form related to conflict of interests if I am appointed.

|  |  |
| --- | --- |
| Date | Signature - handwritten |
|  |  |

1. The official EU languages are: Bulgarian, Croatian, Czech, Danish, Dutch, English, Estonian, Finnish, French, Irish, German, Greek, Hungarian, Italian, Latvian, Lithuanian, Maltese, Polish, Portuguese, Romanian, Slovak, Slovenian, Spanish, and Swedish.

Please indicate the appropriate level (A1, A2, B1, B2, C1, and C2) in the corresponding box, using the European self-assessment grid as reference (see <http://europass.cedefop.europa.eu/sites/default/files/cefr-en.pdf>) [↑](#footnote-ref-1)