



APPLICATION FORM

I apply for a foreign internship

Personal data

Surname:

First name:

Place of birth:

Date of birth:

Permanent address

Country, post code:

City, street:

Mobile phone:

E-mail:

Studies

Profession's name (what you learn/will learn):

Number of profession's years you have completed (if relevant):

Competences

Skills (programmes, machines, facilities, means):

a,

b,

c,

Results

The average of your last year:

The foreign language's grade of your last year:

Language knowledge (put x in the right place):

	fluent	good	average	poor
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Preferred countries (if relevant, set up an order):

Any other information:

Please, fill out this form, with special regard to personal data!

Date:

Signature: