

# OFFICIAL TRAINEESHIP SCHEME

**INTERNATIONAL  
OLIVE COUNCIL**

**APPLICATION FORM**

Calle Príncipe de Vergara, 154  
28002 MADRID



Recent photo  
(max. 5 x 5 cm)

**PLEASE COMPLETE AND RETURN THIS APPLICATION FORM AND ALL ACCOMPANYING DOCUMENTS TO THE IOC EXECUTIVE SECRETARIAT:**

- VIA E-MAIL (ADDRESS: [iooc@internationaloliveoil.org](mailto:iooc@internationaloliveoil.org));

**OR**

- VIA POSTAL DELIVERY (ADDRESS: International Olive Council, calle Príncipe de Vergara, 154, 28002, Madrid, Spain).

1. Application for the traineeship for.....

Please answer all questions, if necessary stating *none*. Do not cross out or leave any boxes blank. Use block letters. **Remember to sign the form and to attach a photo.**

2. Surname (this application will be registered under this surname, which should be mentioned in all subsequent correspondence)  
.....

3. First name(s):  
.....

(Please underline the name you are usually known by)

4. Address:.....  
Tel.: .....  
E-mail: .....  
(Any change of address must be notified)

5. Nationality at birth: ..... Current nationality: .....

Passport number .....

**Please attach a copy of your passport or of your identity card**

6. Date of birth: .....

Place of birth (town, region, country): .....

7. Education (**please attach supporting documentation**)

7.1 Higher education

University or college	Period of study		Degrees or other qualifications obtained
	From	To	
.....			.....
.....			.....
.....			.....

7.2 Post-graduate studies

University or college	Period of study		Degrees or other qualifications obtained
	From	To	
.....			.....
.....			.....
.....			.....

8.

Language proficiency (please list any qualifications obtained)

MOTHER TONGUE .....

	READING			WRITING			SPEAKING		
	Fluent	Good	Fair	Fluent	Good	Fair	Fluent	Good	Fair
Arabic									
English									
French									
Italian									
Spanish									
Other									

9.

Computer skills

Systems

.....

.....

.....



**13. Declaration**

I, the undersigned, ....., hereby declare on my honour that the information provided in this application form is complete, accurate and true.

I likewise give my word of honour that:

- I am a citizen of one of the member countries of the IOC where I enjoy full rights as a citizen;
- I meet the character requirements for the duties entailed in the traineeship;
- I am in good health.

I undertake to supply, when so requested, supporting proof of the above three points and I understand that failure to do so may result in my application being considered void.

I agree to undergo the statutory medical examination to check I am physically fit to perform the duties entailed in the traineeship.

Date and signature

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