



Executive Administration Application Form

Please read the following instructions carefully.

Please answer each question completely and in English.

Do not leave any blanks - all items must be completed. Follow character limits where specified.

All date fields must follow the format dd/mm/yyyy.

Attach a copy of your passport and evidence of your highest educational or professional qualification. You may also attach a CV. Supported file formats for attachments are: PDF, JPEG and PNG only.

Completed forms and attachments are to be submitted via your National Focal Point, unless directed otherwise.

Appl_ID:

1. VACANCY FOR WHICH YOU ARE APPLYING

Post No:

Post Title:

Recruitment campaign number:
(do not fill - for HR use only)

2. PERSONAL INFORMATION

Title:

Gender:

If self described:

First Name(s):

Last Name(s):

Date of birth:

Country of Birth:

Place of Birth:

Marital Status:

Nationality:

Second nationality (if applicable):

Reason for **second** nationality:

3. SPOUSE/LEGAL PARTNER (if applicable)

First Name(s):

Last Name(s):

Date of birth:

Nationality:

Partner Gender:

If self described:

Partner Title

Partner marital status

Partner Address

4. DEPENDANTS (if applicable)

First Name(s):	Last Name(s):	Relationship:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth:	Nationality:	Current Address:
<input type="text"/>	<input type="text"/>	<input type="text"/>

First Name(s):	Last Name(s):	Relationship:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth:	Nationality:	Current Address:
<input type="text"/>	<input type="text"/>	<input type="text"/>

First Name(s):	Last Name(s):	Relationship:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth:	Nationality:	Current Address:
<input type="text"/>	<input type="text"/>	<input type="text"/>

5. PLACE OF RESIDENCE / CONTACT DETAILS

5.1 Present address (to which correspondence should be sent):

Street:	Post Code:	Town /City:	Country:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Private email		Private telephone numb. (e.g. +49 ...):	Private mobile numb. (e.g. +49 ...):
<input type="text"/>		<input type="text"/>	<input type="text"/>

5.2 Home address is different to above address (tick box and provide home address)

☐

Street:	Post Code:	Town / City	Home Country:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

5.3 Can we contact you at your place of work?

☐ Yes ☐ No

Work email:	Work telephone number (e.g. +49 ...):	Work mobile number (e.g. +49 ...):
<input type="text"/>	<input type="text"/>	<input type="text"/>

6. NATIONAL STATUS

Status:	if other, please specify:	Current rank, grade or Job Level:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you have a Security clearance?

☐ Yes ☐ No	Security level:	Valid until:
	<input type="text"/>	<input type="text"/>

7. LANGUAGES

Native Language:

If other, please specify:

With reference to the OCCAR Language Level Guidance (available on the OCCAR website), and excluding your native language, please indicate your proficiency level for any other languages.

English Skill level:
-

French Skill level:
-

German Skill level:
-

Italian Skill level:
-

Spanish Skill level:
-

Dutch Skill level:
-

Other languages:

Skill level:
-

Skill level:
-

8. INFORMATION COMMUNICATION TECHNOLOGY SKILLS

MS Word Skill level:
-

MS Excel Skill level:
-

MS Powerpoint Skill level:
-

MS Outlook Skill level:
-

MS Project Skill level:
-

MS D365FO (ERP) Skill level:
-

Other Software #1

Skill level:
-

Other Software #2

Skill level:
-

9. PREVIOUS APPLICATIONS FOR A POST AT OCCAR (if applicable)

Please indicate up to three of your previous applications

Post No:

Date:

Interviewed:

☐

Yes

☐

No

Selected:

☐

Yes

☐

No

Post No:

Date:

Interviewed:

☐

Yes

☐

No

Selected:

☐

Yes

☐

No

Post No:

Date:

Interviewed:

☐

Yes

☐

No

Selected:

☐

Yes

☐

No

10. HIGHEST EDUCATION LEVEL AND OTHER QUALIFICATION

(High School, Secondary School, College, University)

10.1 HIGHEST EDUCATION LEVEL

Name of Institution and Location:

Major subjects:

Date of highest degree:

Degree or other diploma:

Length of study:

Please provide a copy of highest certificate or diploma.

10.2 OTHER PROFESSIONAL QUALIFICATIONS, MEMBERSHIP OF BUSINESS OR PROFESSIONAL ASSOCIATIONS

Qualification received:	Awarded by:	
<input type="text"/>	<input type="text"/>	
Date received:	Subject:	Length of study:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Qualification received:	Awarded by:	
<input type="text"/>	<input type="text"/>	
Date received:	Subject:	Length of study:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Qualification received:	Awarded by:	
<input type="text"/>	<input type="text"/>	
Date received:	Subject:	Length of study:
<input type="text"/>	<input type="text"/>	<input type="text"/>

10.3 OTHER RELEVANT TRAINING

Qualification received:	Awarded by:	
<input type="text"/>	<input type="text"/>	
Date received:	Subject:	Length of study:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Qualification received:	Awarded by:	
<input type="text"/>	<input type="text"/>	
Date received:	Subject:	Length of study:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Qualification received:	Awarded by:	
<input type="text"/>	<input type="text"/>	
Date received:	Subject:	Length of study:
<input type="text"/>	<input type="text"/>	<input type="text"/>

11. EMPLOYMENT HISTORY

Starting with your current position, please list your three most recent employments in reverse chronological order (maximum of 900 characters per section). Additionally, you may include in **Section 18** any other previous employment that you consider relevant to the position you are applying for. Please note that it is not sufficient to complete these items by simply stating “refer to curriculum vitae”.

11.1 PRESENT EMPLOYMENT

Company / Address:

Position held:

From:

To:

Number of people
reporting to you:

Name and position of person to whom you report:

Describe duties and scope of responsibilities:

How much notice are you required to
give before leaving your position?

Reasons for leaving:

Do you have any objections to us contacting your present employer?

☐

Yes

☐

No

11.2 PREVIOUS EMPLOYMENT #1

Company / Address:

Position held:

From:

To:

Number of people
reporting to you:

Name and position of person to whom you report:

Describe duties and scope of responsibilities:

Reasons for leaving:

Do you have any objections to us contacting your previous employer?

☐

Yes

☐

No

11.3 PREVIOUS EMPLOYMENT #2

Company / Address:

Position held:

From:

To:

Number of people
reporting to you:

Name and position of person to whom you report:

Describe duties and scope of responsibilities:

Reasons for leaving:

Do you have any objections to us contacting your previous employer?

☐

Yes

☐

No

11.3 PREVIOUS EMPLOYMENT #3

Company / Address:

Position held:

From:

To:

Number of people
reporting to you:

Name and position of person to whom you report:

Describe duties and scope of responsibilities:

Reasons for leaving:

Do you have any objections to us contacting your previous employer?

☐

Yes

☐

No

12. ESSENTIAL KNOWLEDGE AND EXPERIENCE

Using examples from your current or previous roles (or from other relevant situations), please provide evidence to support requirements as detailed at the Vacancy Notice in Para 4.1 (Maximum of 800 characters per section).

ES1:

ES2:

ES3:

ES4:

ES5:

13. DESIRABLE KNOWLEDGE AND EXPERIENCE

Using examples from your current or previous roles (or from other relevant situations), please provide evidence to support requirements as detailed at the Vacancy Notice in Para 4.2 (Maximum of 800 characters per section).

DS1:

DS2:

DS3:

DS4:

DS5:

14. COMPETENCES & SKILLS

Using examples from your current or previous roles (or from other relevant situations), please provide evidence to support requirements as detailed at the Vacancy Notice in Para 3 (Maximum of 800 characters per section).

CS1:

CS2:

CS3:

CS4:

CS5:

15. STATEMENT OF MOTIVATION

Please summarise why you meet the requirements of the post and should be selected and add a brief description of your motivation to apply for this post (Maximum 1200 characters)

16. REFERENCES

Please give names and addresses of **three** Referees (who should not be related to you) who may be approached in connection with your application.

First Name(s):

Last Name(s):

Position:

May be contacted before interviews?

Yes

No

Phone:

E-mail:

First Name(s):

Last Name(s):

Position:

May be contacted before interviews?

Yes

No

Phone:

E-mail:

First Name(s):

Last Name(s):

Position:

May be contacted before interviews?

Yes

No

Phone:

E-mail:

17. ARE YOU RELATED TO ANY STAFF MEMBER CURRENTLY EMPLOYED BY OCCAR (e.g., spouse, legal partner, long-term partner, or other close family member)?

☐ Yes ☐ No

Please specify #1:

Please Specify #2:

Please Specify #3:

18. ADDITIONAL INFORMATION

If the space provided in **Section 11 – Employment History** is not sufficient, you may use this field to continue your entry. Please indicate the relevant section number when doing so. (Maximum 3000 characters)

19. HOW DID YOU BECOME AWARE OF THIS VACANCY?

-

Other source:

20. DATA PROTECTION

The information that you provide on this form and that obtained from other sources will be used to process your application for employment. If you succeed in your application and take up employment with us, the information will be used in the administration of your employment with us. By submitting the application form you agree to the processing of sensitive personal data. If your application is unsuccessful, the form and related attachments will be destroyed.

☐

By submitting the application I agree to the processing of sensitive personal data and I declare that I have taken notice of OCCAR's data protection statement (OCCAR Privacy Statement - <https://www.occar.int/privacy-data-protection>).

21. DECLARATION

By submitting the application I declare that the information given on all parts of this application form, and in any other forms of documentation which accompanies it, is, to the best of my knowledge, correct. I understand that giving false information will make my application unacceptable and, if I am appointed, lead to my dismissal.

I am aware that candidates selected for a post are required to undertake a medical examination by a doctor designated by OCCAR-EA to assess their fitness for duty. By submitting the application I agree to undergo such an examination.

Application date:

Please remember to attach a scanned copy of your highest qualification certificate and passport to your application.

This form will be processed automatically. Therefore, it is essential to submit it in the original format and not as a scanned, signed or locked version.