# Eligibility criteria grid

**Please indicate traineeship reference number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| First name: Click here to enter text. | Family name(s): Click here to enter text. |

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| I have completed the first cycle of university education and obtained a full degree or its equivalent by the closing date for applications |  |  |
| I am a national of a member state of the European Union, Iceland, Liechtenstein, Norway or candidate country upon their accession  **Please specify country:** |  |  |
| Click here to enter text. | |
| I have not benefited or benefit from any kind of in-service training (paid or unpaid) within EU institution or body as specified in art.2.3 in the Annex 1 to the EBA’s decision of the Management Board EBA DC 101/2014 on paid traineeships *(further Decision on paid traineeships).* |  |  |
| I have no prior full-time professional work experience as specified in art.2.3 of the Decision on paid traineeships |  |  |
| I have very good knowledge of English |  |  |

|  |  |  |
| --- | --- | --- |
| I have submitted my CV in the Europass format |  |  |

|  |  |  |
| --- | --- | --- |
| I have submitted motivation letter *(max 1 page)* |  |  |

|  |  |  |
| --- | --- | --- |
| I have submitted copies of the documents (diploma’s) confirming my education as provided in the CV |  |  |

**Declaration:**

I declare in my word of honor, that the information provided above is true and complete.

If offered the traineeship, I will declare any conflict of interest before joining the EBA as per EBA rules.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature: |  |  | Date: | Click here to enter a date. |