# Eligibility criteria grid

# Policy Expert

# (Operational risk and quantitative policy)

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

## 1.1. General **Yes No**

|  |  |  |
| --- | --- | --- |
| I have a thorough knowledge of one of the languages of the EU and a satisfactory knowledge of another language of the European Union | [ ]  | [ ]  |
| I am a national of a member state of the European Union, Iceland, Liechtenstein, Norway**Please specify country:** | [ ]  | [ ]  |
| Click here to enter text. |
| I am entitled to my full rights as a citizen | [ ]  | [ ]  |
| I have fulfilled any obligations imposed by applicable laws on military service | [ ]  | [ ]  |
| I am physically fit to perform the duties linked to the post | [ ]  | [ ]  |

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| 1.2. Specific |
| 1.2.1. a) I have a level of education which corresponds to completed university studies attested by a diploma and appropriate professional experience of at least one year when the normal period of university education is at least three years, or | [ ]  | [ ]  |
| 1.2.1. b) I have a level of education which corresponds to completed university studies attested by a diploma when the normal period of university education is four years or more | [ ]  | [ ]  |
| 1.2.2. In addition to above, I have: |  |  |
| * At least **7 years** (on the basis of 1.2.1 a)
 | [ ]  | [ ]  |
| * At least **6 years** (on the basis of 1.2.1 b)
 | [ ]  | [ ]  |
| of relevant proven fulltime professional experience in some or all the fields covered by the job description after completing the education as mentioned above, **of which at least three years** in a specific area of supervision, operational risk analysis or related regulatory work in the area of operational risk. | [ ]  | [ ]  |
| 1.2.3. I have an excellent knowledge of English language (written and spoken) | [ ]  | [ ]  |

**Declaration:**

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

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