

EUROPEAN STATISTICAL TRAINING PROGRAMME (ESTP)



Application form for the course on:

.....
Course title

.....
Place

.....
Date

Please submit this application duly completed to the **ESTP contact point at your National Statistical Institute**. The contact point will arrange for your registration. All participations will be confirmed two weeks after the registration deadline.

First name / Surname	Ms <input type="checkbox"/> Mr <input type="checkbox"/>
Nationality / Date of birth	
Level of English	Medium <input type="checkbox"/> High <input type="checkbox"/>
Highest educational degree (Date, subject)	
Employer (Organisation / department)	
Address at work (E-mail, direct phone)	
Current professional position (since when, brief job description)	
Which background do you have in the subject field? Please give details.	
What is the value added you expect from this course? Please note that your application will be assessed based on the information provided.	<i>Please explain:</i> <i>Why do you want and/or need to take part in this course?</i> <i>How do you expect to apply your new skills and knowledge after the course?</i> <i>What difference will the learning make to your (and your colleagues) work?</i> <i>How do you plan to exchange experience/practices with other participants?</i>
Is there any subject you would like emphasis to be put on?	
Date and signature	<i>Agreement of the responsible line manager (if required by the home administration)</i>

Important Note: All applications should be filled and sent in both word and pdf format.