APLICATION FORM

SURNAME:
NAME:
FATHER'S NAME:
DATE OF BIRTH:
INSTITUTION:
POSITION:
ID CARD NR. / PASSPORT NR:
E-mail:
TEL. NR:

SUBJECT:

Nomination for the position of external memberof the Governing Council of the Hellenic Open University.

ATTACHED DOCUMENTS:

1. Copy of Identity Card or Passport

2. Detailed CV

3. Any additional document or proof the candidatedeems necessary to support the candidacy (optional).

4. Letter of interest for the position of externalmember (optional).

SUBMITTED TO THE Hellenic Open University

I Hereby:

a) submit my nomination for the position of external member at the Governing Council of the Hellenic Open University according to the current legislation law within the framework (ref. nr.....) of the open call for the nomination of external membersof the Governing Council of the Hellenic Open University.

b) accept the terms and conditions of my nomination process and declare that I acknowledge all duties resulting from my participation as an external member of the Governing Council of the Hellenic Open University as well as competences executed by the Governing Council of the H.E.I.s according to nr. 14reg. law no. 4957/2022.

c) consent with the collection and processing of my personal data as stated in this nomination and all submitted documents exclusively for the evaluation purposes of my candidacy for the nominationprocedure of the open call (ref. nr.).

Location/Date

Applicant's Name

.....

(Digital Signature)