



Erasmus+ Application Form

Personal Data:

Name:		Address:	
Surname:		Postal code:	
ID/Passport:		City:	
Nationality:		Country:	
Genre:		Email:	
Date of birth:		Mobile phone:	

Education & Training:

Ending date :	Title and level of the studies, training, or course:	Educational institution where it was obtained:

Work experience:

Current professional profile:			
Starting date:	Ending date:	Position:	Employer:

Languages:

Mother tongue:			
Other languages:	Level:	Do you have official recognition?	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Observations:

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① Basic Information on Protection of Personal Data:

1. Responsible of the control:	Move On Solutions S.L.U. VAT number: B90081530. Address: C/ Arquitectura, 2. Torre 11, Planta 4ª, Oficina1. 41015. Seville. (Spain). For any clearance regarding to our privacy policy: privacy@emtraining.es
2. Purpose:	We will process your personal data only to manage your training placement in Seville and additional services requested by your sending organization. We keep your data UP to 30 days after the ending of your training placement.
3. Legal basis:	Legitimization by consent of the interested party (you). You have the right to withdraw your consent at any time.
4. Recipients:	We provide your personal data to: your sending organization, candidate host organizations, final host organization, and depending on the services contracted, to: airlines, hotel establishments, landlords and monuments.
5. Rights:	You have the right to <u>access</u> , <u>correct</u> , <u>restrict</u> , or <u>object</u> to a process, <u>erase</u> and apply for the <u>portability</u> of your personal data, as well as <u>claim for any possible violation of these rights</u> by us to the Spanish Agency for the Protection of Personal Data.
6. Security:	We guarantee the security of your personal data through the duty of confidentiality and secrecy of our staff, adopting contractual agreements with the recipients of your data and technical measures.
7. + info:	https://emtraining.es/documents/privacy_policy.pdf

To be fill if you are **OLDER THAN 16 YEARS OLD:**

I Mr/Ms:

I declare that the information contained in this document is true.

I declare that I do not present any medical condition that could affect the regular development of my training placement in Seville.

I freely consent to Move On Solutions S.L.U. (EMTraining) to process my personal data with the purpose and in the terms reported above, by signing this document.

(applicant signature)

Place and date:

To be fill by the **father/mother** of the participant **IF UNDER 16 YEARS OLD:**

I Mr/Ms:

As father/mother of:

I declare that the information contained in this document is true.

I declare that my son/daughter do not present any medical condition that could affect to the regular development of his/her training placement in Seville.

I consent to Move On Solutions S.L.U. (EMTraining) to process the personal data of my son/daughter with the purpose and in the terms reported above, by signing this document.

(parents signature)

Place and date:

Please, click on the **"SAVE"** button before closing this document.

Please, **SIGN, SCAN** and **SEND** this document to: **info @emtraining.es**