

CAS in Consecutive Interpreter Training 4 September 2017 – 29 January 2018

PLEASE ATTACH THE FOLLOWING DOCUMENTS

- ☐ Curriculum Vitae
 ☐ A copy of your picture ID
 ☐ Covering letter
☐ Proof of formal interpreter training
 ☐ Proof of professional experience

COMPLETE FILE

to be returned until 30 June 2017 to:

Sandra LANCOUD
 FTI – Uni Mail, Université de Genève
 Bd du Pont d'Arve 40 – 1211 Genève 4
 INF-FTI@unige.ch

All the information provided will be treated in the strictest confidence in accordance with data protection legislation.

Personal data

Please complete in block capitals

☐ Ms./Mrs. ☐ Mr.

Surname/Family name: Maiden name:

First name: Middle name:

Date of birth (day/month/year):

Occupation:

Swiss nationality: ☐ yes ☐ no Canton: Nationality(ies)

MAILING ADDRESS (tick one box only)

☐ personal ☐ business

BILLING ADDRESS ☐ personal ☐ business

PROFESSIONAL CONTACT DETAILS

Company/Institution:

Address:

Post code/City/Country:

Tel: Fax:

E-mail:

PERSONAL CONTACT DETAILS

Address:

Post code/City/Country :

Tel : Fax:

E-mail:

AVS

Since 2011, the enrolment number for students at Swiss has been based on the AVS number.

AVS number:

If you do not have an AVS number (Swiss social security), you will be attributed one by the University of Geneva. Please provide the following information in the event that your identification data (Surname, first name, date of birth) is not unique in the Swiss information system:

Surname/Family name of your father : First name of your father :

Surname/Family name of your mother: First name of your mother:

Education

PREVIOUS UNIVERSITY EDUCATION

Have you previously enrolled in a Swiss higher education institution? ☐ yes ☐ no

Swiss enrolment number (SIUS): -

If you are not able to provide your enrolment number, please give the name of the last higher education institution you attended in Switzerland. This will enable us to retrieve your enrolment number:

HIGHEST DEGREE OBTAINED

- ☐ Federal Certificate of Competence (CFC)
- ☐ Vocational school-leaving certificate
- ☐ General school-leaving certificate
- ☐ Bachelor/Master from University of Applied Sciences / University of Teacher Education
- ☐ Bachelor/Master/Doctorate from University or Federal Institute of Technology
- ☐ Other :

HIGHEST DEGREE ISSUED BY:

University:

Country:

City:

Degree (type of certificate): ☐ Bachelor ☐ Master ☐ Postgraduate Certificate ☐ PhD

Full title of qualification:

Start year: Year of completion :

Number of semesters : Number of ECTS credits earned :

Additional information

HOW DID YOU FIND OUT ABOUT THIS COURSE? (tick all that apply)

- ☐ Personal recommendation
- ☐ My company
- ☐ Education/careers adviser
- ☐ Newspaper advertisement => state which:
- ☐ University of Geneva brochure / Prospectus / Poster / Continuing education course catalogue
- ☐ University of Geneva continuing education website www.unige.ch/formcont
- ☐ Another website => state which:
- ☐ Direct enquiry to the University of Geneva
- ☐ E-mail advertising the course
- ☐ At a job fair => state which:
- ☐ Other:

CONTINUING EDUCATION EXPERIENCE OVER THE LAST TWO YEARS

Please include all types of education and training, including seminars, symposia, conferences, debates, etc.

- ☐ No other experience of continuing education

Number of courses of up to one day (8 hours):

Number of courses of more than one day (> 8 hours):

Number of degree courses (Certificate/Diploma/Master of Advanced Studies, etc.): :

Additional information

EMPLOYMENT

Are you currently in employment?

☐ Yes, full-time☐ Yes, part-time => Full time equivalent:%☐ No => because you are:☐ Seeking employment☐ On training leave☐ Retired☐ Other, please specify:*If you are not currently in employment, please complete the section below based on the last position in which you were employed.*

Job title:

Type

☐ Self-employed☐ Senior manager☐ Middle manager☐ Employee

Sector

☐ Self-employed business☐ Public administration or similar☐ Association☐ Private company☐ NGO☐ European organisation☐ International organisation

Size of company

☐ 1 employee☐ 2 to 10 employees☐ 11 to 50 employees☐ 51 to 100 employees☐ 101 to 500 employees☐ 501 to 1000 employees☐ over 1,000 employees

The following three questions are optional, but help us get a better understanding of our students' situation.

The data are kept confidential and are strictly used for statistical purposes.

Civil status:

☐ single☐ married☐ civil partner☐ divorced☐ separated☐ widowed☐ other

Number of children:

Birth place (Country; Canton if Switzerland; Departement if in France):

Comments:

Registration

I would like to enrol in the:

☐ CAS in CONSECUTIVE INTERPRETER TRAINING 2017-2018

and agree to pay the sum of CHF 3,000 on receipt of confirmation of my registration.

CANCELLATION CONDITIONS

Any withdrawal before the start of the programme will incur an administration fee of CHF 400. Fees will be payable in full one week before the course begins.

Incomplete applications will not be considered.

By signing this form, you confirm that the information you have given is correct and complete.

Date:Signature: