

## APPLICATION

SURNAME:

NAME: .....

FATHER'S NAME:.....

DATE OF BIRTH:.....

CAPACITY:.....

ID CARD Nr./PASSPORT Nr: .....

E-mail:.....

PHONE:.....

**Subject:** *Candidacy for the position of external member of the Administrative Council of the Aristotle University of Thessaloniki*

### Attachments:

- a. Copy of State ID card or Passport
- b. Full Curriculum Vitae
- c. Supporting documents or material (*optional*)
- d. Letter of expression of interest for selection to the position of external member (*optional*)

## SUBMITTED TO

**the Aristotle University of  
Thessaloniki**

With this application:

A) I am applying for the position of external member of the Administrative Council of the Aristotle University of Thessaloniki, in accordance with the applicable legislation, in the context of the international open call with Ref. Number 81933/29.06.2023 for the nomination of the external members of the Administrative Council of the Aristotle University of Thessaloniki

B) I accept the terms of participation in this call and declare that I am aware of the obligations arising from the status of an external member, in case of my election, as well as the responsibilities exercised by the Administrative Council of the Aristotle University of Thessaloniki, in accordance with article 14 of Law 4957/2022, as in force

C) I declare that I consent to the collection and processing of my personal data, as stated in this application and the supporting documents submitted with it, exclusively for the evaluation of my candidacy in the context of the procedure of the international open call with Ref. Number 81933/29.06.2023.

*Location/Date:*

The Applicant (name and digital signature)