



EUROPEAN CENTRAL BANK

EUROSYSTEM

PERSONAL DETAILS UPON SHORT TERM APPOINTMENT

(PLEASE COMPLETE THIS FORM IN DETAIL)

I. PERSONAL DATA		
1. Member of staff		
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms Surname First name(s) Maiden name Date of birth (dd/mm/yy) Place of birth (city/country) Present nationality/(ies)/...../...../...../..... Has your nationality ever been changed or is it in the process of being changed? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:		
<u>Home Address</u> Street/House number:..... Post code/City:..... Country:..... Tel. number	<u>Address in Frankfurt area</u> Street/House number:..... Post code/City:..... Tel. number..... <input type="checkbox"/> This is my temporary accommodation and I hereby claim the accommodation allowance. (only for people recruited >50km away from Frankfurt and who are not staying in an ECB-provided hotel)	
Telephone (Mobile) Telefax	Telephone (Office) E-mail	
<u>Emergency contact</u> Person to be contacted: Family Name:..... First Name:..... Address:..... Country:..... Tel. Number..... E-mail:	<u>Fiscal Residence</u> <i>i.e. the country where you have filled your tax declaration before joining the ECB or other EU Institution</i> Street/House number:..... Post code/City:..... Country:.....	
Marital status <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> recognised partnership since/...../..... since...../...../.....	<input type="checkbox"/> divorced <input type="checkbox"/> separated <input type="checkbox"/> widowed since...../...../..... since...../...../.....	

2. Spouse/Partner (If your non-marital partnership has been recognised by a state or government; please include the certificate)

Mr. **Surname** **First name(s)**
 Ms

Maiden name **Date of birth (dd/mm/yy)** **Nationality(ies)**
.....

Is your spouse/recognised partner currently employed? Yes Yes by ECB No

I declare that all the information given on this form is correct and complete to the best of my knowledge and belief. I understand that any false statement, misrepresentation or material omission made in this form or other document requested by the ECB may provide grounds for the withdrawal of any offer of appointment or render me liable for termination or dismissal, if employed.

I authorise the ECB to retain and process this information in accordance with Regulation (EC) No 45/2001 of the European Parliament and of the Council of 18 December 2000 on the protection of individuals with regard to the processing of personal data by the Community institutions and bodies. I reserve the right to have access to this information and to rectify it where necessary

Date:/...../.....

Signature:.....