

RECOGNITION OF QUALIFICATIONS/DIPLOMAS REIMBURSEMENT FORM

For your application to be eligible, you must complete all the fields of the form using **capital letters** and submit the documents listed below (in one single PDF document) to:

esusolidaritycorps@pole-emploi.fr

- Completed form 4,
- Invoice(s) for the recognition of qualification/diplomas proceedings (certified copies and/or translations, administrative proceedings, and/or aptitude tests),
- Bank details holding your name with IBAN and BIC/SWIF.

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Personal information:

I, the undersigned

Surname:

First name:

Registration number on the *European Solidarity Corps* portal:

Nationality: Date of birth:...../...../..... (dd/mm/yyyy)

Current country of residence:

Address:

.....

Postal code (if applicable): City:.....

Country:

Phone number: (+.....).....

E-mail address:

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About the company:

If you have obtained a promise of employment or a solidarity-related work, traineeship or apprenticeship contract with a minimum duration of 2 months and a maximum duration of 12 months in a different EU Member State, please send the corresponding documents and fill in the details below:

Company name:

Registration number:

Contact:

E-mail address:

Address:

Postal code (if applicable): City:.....

Country: Number of employees:

Job title:

Start date of the contract: (dd/mm/yyyy)

End date of the contract: (dd/mm/yyyy)

Duration of the contract: Type of contract:

*Fixed term work contract, apprenticeship or traineeship

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I hereby confirm that I have paid the amount of EUR for the recognition of my qualifications and/or my diplomas (amount similar to the receipt or the invoice).

I claim for: a partial reimbursement of the costs for the sum of: EUR

a reimbursement of the total costs for the sum of: EUR

The reimbursement, financed by the *European Solidarity Corps* programme will not exceed a maximum amount according to the European Commission implementing guide. In case of a claim for a partial payment of the financial allowance, the amount will not exceed 50% of the total amount of the costs incurred.

I understand that for reimbursement entitlement I must:

- Have obtained a written authorisation** from the European Solidarity Corps programme before starting the proceedings for the recognition of my qualifications/diplomas (*Application form 4*),
- **Attach** all the requested documents.

Date: / / (dd/mm/yyyy) Signature:

To be completed by the *European Solidarity Corps* programme

The financial support is granted not granted by the *European Solidarity Corps* programme

Motivation if not granted:

Verified by: (*e-mail address*)

Date: (dd/mm/yyyy) Signature:

Total amount (EUR):

Approved for payment: