

APPLICATION FORM

ARTISTIC DIRECTOR – CONDUCTOR OF THE CYPRUS SYMPHONY ORCHESTRA

Please complete the application form in capital letters:

Full name			
Nationality	Passport / Identity number	Date of Birth	
Permanent Address			
Postal Code	City	Country	Telephone no.

Name of Educational Establishment / Higher Education Institution / College / University	From (month/year)	Until (month/year)	Title obtained
1.	___/___	___/___	
2.	___/___	___/___	
3.	___/___	___/___	
4.	___/___	___/___	

Language proficiency (inadequate, medium, good, very good, excellent)	English	Greek	French	German	Other (state which)
Reading					
Writing					
Speaking					

Work experience up to present and positions held: Name and address of employer or Organisation	From (month/year)	Until (month/year)	Position	Monthly income (€)
1.	___/___	___/___		
2.	___/___	___/___		
3.	___/___	___/___		
4.	___/___	___/___		
5.	___/___	___/___		

State the reasons why you wish to undertake the position of Conductor – Artistic Director of the Cyprus Symphony Orchestra

State any other additional information you wish to give

Attached certificate copies

Recommendations	Name	Address	Profession
1.			
2.			

I hereby state that I have provided all the information requested on the present form, that to the best of my knowledge all the information given is true and that the form has been completed by myself. I understand that any deliberate inaccuracy or omission on my behalf, may result to my exclusion from the process or the immediate decumbency of my appointment, in case I am appointed.

Please attach a recent photo

Applicant signature

Date