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| Photo(not mandatory) | **PRELIMINARY Application for Participation** **in ERASMUS Higher Education** **TRAINEESHIP MOBILITY 2022**  |
| Name: | Surname: |
| Address: | Date of Birth: |
| Phone No:+371  | E-mail: |
| **Higher Education study programme title, length of study, CP / ECTS**Completed traineeship mobility will be recorded in the transcript in CP / ECTS. | HOTEL SCHOOL Hotel Management College First-level professional higher education programme “Hospitality Service Organization”, 2 years 3 months, 90 CP / 135 ECTS |
| [ ]  **Current student** at HOTEL SCHOOL Hotel Management CollegeFirst-level professional higher education programme “Hospitality Service Organization”  |
| [ ]  **Graduate** from HOTEL SCHOOL Hotel Management CollegeFirst-level professional higher education programme “Hospitality Service Organization” during the last 12 months, diploma date \_\_ \_\_ \_\_\_\_\_\_\_\_  |
| **Estimated completion** **(Month / Year)** | June 2022 – September 2022 |
| **Knowledge of foreign languages**Indicate the level of language proficiency**A-Beginner, B-Intermediate,****C-Advanced** | **Language** | **Speaking** | **Reading** | **Writing** |
|  | **A** | **B** | **C** | **A** | **B** | **C** | **A** | **B** | **C** |
| **English:** |  |  |  |  |  |  |  |  |  |
| **(specify)** |  |  |  |  |  |  |  |  |  |
| **(specify)** |  |  |  |  |  |  |  |  |  |
| **(specify)** |  |  |  |  |  |  |  |  |  |
| **Previous job experience** | Company name, position | from | to |
|  |  |  |
|  |  |  |
| Please attach the letter of recommendation, or traineeship, internship assessment by the employer.  |
| **Traineeship place** **(title, city, country, contact)**  | [x]  I have the traineeship contact and agreed the contractEmployer Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ I do not have the traineeship contract and contact |
| **Traineeship position from agreement or preferred position**  | [ ]  Front Office [ ]  Food & Beverage Department [ ]  Office [ ]  Kitchen [ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (specify) |
| **Traineeship period**(minimum 2 and maximum 5 months) | **from** \_\_\_/\_\_\_/2022 **to** \_\_\_/\_\_\_/2022 |
| **Starting date of the employment is flexible** [ ]  |
| You can disclose information if you are the student with **fewer opportunities**, for example, participant with disability, mental or other health disorders, student with children, with the status of a low-income person, and other (according to Erasmus definitions) | [ ]  participant with fewer opportunities  |
| Attachments: | ☐ CV☐ Motivation letter☐ Signed agreement for LV programme traineeship / internship☐ Other |
| Compliance of travel and residence documents before the mobility for preparation activities in Riga, Latvia | [ ]  travel documents are valid [ ]  residence documents are valid[ ]  travel documents are not valid [ ]  residence documents are not valid[ ]  need a visa[ ]  other (specify) \_\_\_\_\_\_\_\_\_ |
| Compliance of travel and residence documents before the mobility for preparation activities **in traineeship mobility destination (specify)** | Destination Place:\_\_\_\_\_\_\_\_\_\_\_\_\_ (city, country)[ ]  travel documents are valid [ ]  residence documents are valid[ ]  travel documents are not valid [ ]  residence documents are not valid[ ]  need a visa[ ]  other (specify) |

**Declaration of consent**

I agree that the Traineeship / Internship Coordinator of the “HOTEL SCHOOL” Hotel Management College (Smilsu Str. 3, Riga, LV-1050, Latvia, internships@hotelschool.lv, + 371 67213037) may forward my personal data or application documents to employers for the purpose of advice, job search and job placement (by voice/video telephony or e-mail) and this information will be collected, stored and published.

Place and date Signature of applicant

Name, Surname and Signature of applicant’s legal representative (in case the applicant is under age 18):