**APPLICATION FOR THE POSITION OF CONSULTANT SPECIALISED IN THE AREA OF ADOPTION**

**Summary of application**

Candidates are respectfully requested to provide responses to the following questions:

|  |  |
| --- | --- |
| Family name(s): | Please insert text here |
| First name(s): | Please insert text here |
| Middle name(s): | Please insert text here |
| Nationality(ies): | Please insert text here |
| Gender: | Please insert text here |
| Address: | Please insert text here |
| Telephone number: | Please insert text here |
| E-mail address: | Please insert text here |
| **STUDIES AND RELEVANT PROFESSIONAL EXPERIENCE** |
| **University degree**: | Please insert the name of the university herePlease insert the name of the degree hereCompleted in: Please insert year |
| Total number of years of **relevant professional experience**: | Please insert here the number of years |
| Professionalexperience in the **adoption field**: | [ ]  Yes [ ]  NoPlease insert here the number of years/monthsPlease specify here where you gained this experience (e.g. Central Authority, adoption accredited body, other) |
| Professional experience in the **child protection field**: | [ ]  Yes [ ]  NoPlease insert here the number of years/monthsPlease specify here where you gained this experience (e.g. government, international organisation, NGO) |
| Professional experience in **project management in a State of origin:** | [ ]  Yes [ ]  NoPlease insert here the number of years/monthsPlease specify here where you gained this experience and in what type of projects |
| Professional experience in the provision of **legal advice** for drafting legislation:  | [ ]  Yes [ ]  NoPlease insert here the number of years/monthsPlease specify here where you gained this experience and on which legislations |
| Work experience in the organisation and provision of **training courses**:  | [ ]  Yes [ ]  NoPlease specify here the number, length and nature of the courses provided |
| Knowledge of the **Spanish** language**:** | [ ]  Yes, native [ ]  Yes, but non-native\* [ ]  No\* If non-native, please state your level here |
| **APPLICATION DOCUMENTS** |
| I have **attached** to my application: | 1. This **application form**
2. A ***curriculum vitae* (CV)**: [ ]  Yes [ ]  No
3. A **letter of motivation:** [ ]  Yes [ ]  No
4. One **written work sample** (preferably in an area relevant to adoption/child protection)
5. Two **letters of reference:**

[ ]  Yes [ ]  No |
| **Completed applications should be submitted by e-mail to**<**applications@hcch.net**> with the mention in the subject line: Consultant Adoption application \_ [FAMILY NAME] [First name]Please note, all documents should be saved in PDF format and named as follows:[FAMILY NAME] [First name] \_ [Document Number] \_ [Document Name] *E.g.*: SMITH John\_1\_Application form**Incomplete applications, and those submitted after the deadline stated on the HCCH website, will not be considered.** |