APPLICATION FORM

Name:	
Surname:	
Date of birth (dd/mm/yy):	
Address:	
Telephone number:	
Email address:	
	ТО
FOUNDATION OF RESEARCH AND TECHNOLOGY (FORTH)	
INSTITUTE OF MOLECULAR BIOLOGY AND BIOTECHNOLOGY	
Hereby I submit my application as In the framework of the project:	a candidate for the position:
Position code [Ref ##}	
Submitted with this application:	
1	
2	
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I certify that:	
A) I accept the terms and condition	ns of the job announcement
B) I possess all the necessary cert	ificates and documents and I can present them in their original
form to the committee without ar	ny delay if I am asked to do so
C) I am able to complete the proje	ct within the foreseen time -frame
Δ) all the information given in the framework of this application are accurate and true.	
Date:	
	Candidate's name
_	
	(signature)