



CYPRUS  
CHAMBER OF  
COMMERCE AND  
INDUSTRY



**APPL. FORM 1 (HOST)**

## **LEADING BY EXAMPLE PROJECT**

### **CROSS-COMMUNITY EXCHANGE INTERNSHIP PROGRAMME**

### **APPLICATION FORM FOR HOSTS**

*This application form is completed by the company/organisation interested to host a young intern graduate.*

#### **1. COMPANY/ORGANISATION DETAILS**

Name of company / organisation:		Employer's Social Insurance Registry No.:
Telephone:	Fax:	Email:
Physical address:		
Contact person:		Position:
Establishment date:		No. of employees:
Sector/Activity :		
Previous experience / cooperation with the other community: YES <input type="checkbox"/> NO <input type="checkbox"/>		
If yes, please specify: .....		
Languages spoken within the company / organisation:		
English <input type="checkbox"/> Greek <input type="checkbox"/> Turkish <input type="checkbox"/> Other <input type="checkbox"/> (specify) .....		

#### **2. TITLE OF THE POSITION TO BE FILLED BY INTERN**

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### 3. JOB/DUTIES/ RESPONSIBILITIES DESCRIPTION

The description of work / tasks / responsibilities should specify the Department in which the graduate intern will be placed, the tasks to be undertaken, as well as the expected working times and hours.

**It is emphasized that the related tasks/responsibilities should respond to a graduate level.** The CCCI and KTTO will not approve positions that are determined as not being appropriate for graduates.

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### 4. PERIOD OF INTERNSHIP

The internship should last for 3 consecutive months within the period 14<sup>th</sup> September 2015 – 29<sup>th</sup> April 2016. Please specify your preferred months (you may include more than 1 preference).

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### 5. DECLARATION

I declare that:

- I am the authorized legal representative of the company/organization.
- The statements made by me in this application form are true, complete and correct. I understand that any misrepresentation or material omission made in this form or other document requested by the CCCI and KTTO may lead to immediate termination of the internship.
- I have read and accepted the *General Terms and Conditions* governing the "*Leading by Example*" Cross-Community Exchange Internship Programme.
- If my application is approved, I will arrange that the Intern selected will be fully insured against employers' liability for the 3-month duration of the internship programme.

**CCCI and/or KTTO retain their right of demanding additional information or clarifications, as well as to investigate the data included in this application form.**

I consent to the publication of the company's/organisation's name in the local media as a host under the "*Leading by Example*" Cross-Community Exchange Internship Programme. Yes ☐ No ☐

<p>.....</p> <p>Date</p>	<p>.....</p> <p>Name and Surname of the authorised legal representative</p>	<p>.....</p> <p>Signature and Stamp of company/organisation</p>
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<b>FOR OFFICIAL USE ONLY</b>	
Ref. Number: _____	
OFFICER SIGNATURE: _____	DATE (dd/mm/yyyy): ____/____/____

***Applications can be submitted from 15<sup>th</sup> May to 4<sup>th</sup> September 2015***

and will be treated on a first-come first served basis until the required number of matchings between suitable intern-host applicants is completed.

All applications should be delivered/sent to one of the following addresses either by hand or e-mail:

**Cyprus Chamber of Commerce and Industry**

Deligiorgi 3, 1066 Nicosia, 5th floor,

**Email:** [gvenizelou@ccci.org.cy](mailto:gvenizelou@ccci.org.cy)

**Attn:** Ms. Georgia Venizelou

**Turkish Cypriot Chamber of Commerce**

90, Bedrettin Demirel Caddesi, Lefkoşa

**Email:** saltuner@ktto.net

**Attn:** Ms. Saziye Altuner

