



## HELLENIC MPSOTC APPLICATION FORM

TEL +30.23410.27468



e-mail: [mpsotc@hndgs.mil.gr](mailto:mpsotc@hndgs.mil.gr), web: <https://mpsotc.army.gr>, Facebook, Linked-in: [Hellenic MPSOTC](#)

**Course Title :**

**Course Date :**

### Applicant's Personal Data

(Submission Date)  
DD/MM/YYYY

Last Name

First Name

Father's Name

Mother's Name

Nationality

Male

Female

National ID Card No

Rank/Title

Duties

Unit or Organisation

Superior/Supervisor details

Passport Number

Cell Phone

Date of Birth

Work Phone

Place of Permanent Residence

Place of Birth

E-mail Address (please provide a valid e-mail address in order to confirm your participation)

### Applicant's Emergency Contact details

Name

Phone

The applicant meets the English Language proficiency requirements as described in STANAG 6001 Listening Good (3), Speaking Fair (2), Reading Good (3), Writing Fair (2)\*.

For non military personnel, same language proficiency is needed, according to the relevant international standards for language competence\*.



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### Previous Experience and Training

Short CV (no more than 300 words, highlighting your current and previous posts, training-education, field experience and motives to attend the course)

### Accommodation

I want to be informed for accommodation options  
in Kilkis

Check-in

Check-out

DD/MM/YYYY

DD/MM/YYYY

### I'm informed about the MPSOTC Courses through :

MPSOTC Web page

A Colleague

MPSOTC Brochure

NATO/UN

### Remarks

I have read and agree to the above stated notes and MPSOTC established policy.

**Please send this form by e-mail, to [mpsotc@hndgs.mil.gr](mailto:mpsotc@hndgs.mil.gr)**