



HELLENIC MPSOTC APPLICATION FORM

TEL +30.23410.27468



e-mail: 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*.



HELLENIC MPSOTC APPLICATION FORM

TEL +30.23410.27468

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

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

Check-in

Check-out

I want to be informed for accommodation options
in Kilkis

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