

Registration in ORACLE*HR under the heading "EXTERNAL"

| | | | |
|---|--|------------------------------------|---|
| Person concerned | | | |
| Name | Surname _____ First name(s) _____ <i>(as on passport)</i> | | |
| Sex | <input type="radio"/> female <input type="radio"/> male | Date of birth | __ __ / __ __ / __ __ __ __ Day Month Year |
| Nationality | _____ | | |
| Employer's address ¹ | Name _____ Address _____ Tel. _____ Fax. _____ e-mail _____ | | |
| Social security while at CERN ² | I hereby declare to be insured in France and in Switzerland against - invalidity/death due to an accident, incl. occupational _____ Name of insurance company - illness and accident, incl. occupational _____ Name of insurance company | | |
| Signature | Date _____ Signature _____ | | |
| Period of association with CERN | | | |
| Starting date | __ __ / __ __ / __ __ __ __ Day Month Year | Scheduled end date | __ __ / __ __ / __ __ __ __ Day Month Year |
| Reason for registration | | | |
| | <i>Abbrev.</i> | <i>Registration exclusively by</i> | <i>Max. duration</i> |
| <input type="radio"/> Member of CERN clubs | CLUB | Staff Association | 1 year |
| <input type="radio"/> Member of official CERN committees | COMT | Council Secretariat | = Meeting/mandate |
| <input type="radio"/> Lecturer | CONF | | 3 months |
| <input type="radio"/> External participant in training courses organised by CERN | FORM | Training Service | 1 year |
| <input type="radio"/> CERN Guide with dosimeter | GUID | Visits Service | 1 year |
| <input type="radio"/> Honorary member | HONO | HR Department | = Invitation |
| <input type="radio"/> Host state's authorities (eg. labour inspector, works doctor) | HOST | Registration Service | 2 years |
| <input type="radio"/> Industrial Liaison Officer | ILOF | FP Department | = Mandate |
| <input type="radio"/> Collaboration with an institute other than for an experiment or Visitor within the framework of a collaboration agreement with CERN not fulfilling the conditions to be an Associated Member of Personnel | INST | | 1 year |
| <input type="radio"/> Child attending the CERN Kindergarten or the accompanying person not member of personnel | KIND | Staff Association or HR Department | 1 year |
| <input type="radio"/> Scientific activities of pensioners from institutes who have been previously USER | SCIE | PH department | 1 year |
| <input type="radio"/> Trainee invited directly by a department outside the official programmes organised by HR Department | STAG | HR Department | 3 months |
| <input type="radio"/> Trainee-Apprentice administered by HR Department | STAP | HR Department | 3 months |
| <input type="radio"/> Professional Visitor | VISI | Registration Service | 3 days |
| CERN Guarantor | | | |
| Name | Surname _____ First name(s) _____ | | |
| CERN ID | __ __ __ __ __ _____ | Department | _____ |
| By signing below, the guarantor engages his department's responsibility³ for the person concerned. | | | |
| Signature | Date _____ Signature _____ | | |

¹ It is compulsory to state your employer's address if you require a dosimeter or for registration with the reason INST or VISI.

² Please provide a written justification (e.g. insurance certificate) - *strike out if necessary* -

³ Externals with reason CLUB are under the responsibility of the Staff Association.