

Registration under the heading "EXTERNAL"

Person concerned

Name

Surname _____ First name(s) _____ *(as on passport)*

Gender

female male

e-mail _____

Nationality _____

Date of birth

Day Month Year

Employer's address¹

Name _____

Address _____

Tel. _____

Fax. _____

e-mail _____

- I certify that I am in compliance with all laws applicable to my presence and activity at CERN, including the laws on work and residence permits.
I also certify that I am in compliance with applicable laws concerning social insurance and that in any event, I have health insurance cover against the financial consequences of illness and accident, at levels adequate in Switzerland and France.

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"/> Person accompanying a member of the personnel or a beneficiary of the Pension Fund who requires assistance with mobility | ACCO | Registration Service | 1 year |
| <input type="radio"/> Member of an official CERN committees | COMT | Secretariat of Council, scientific committees and Pension Fund | = Meeting/mandate |
| <input type="radio"/> Lecturer or external participant in conferences... organised by CERN | CONF | | 4 weeks |
| <input type="radio"/> External participant in activities or projects, exclusively teleworking | DIST | | 1 year |
| <input type="radio"/> External participant in an EU project | EUPR | Project's secretariat | 1 year |
| <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 | IPT Department | = Mandate |
| <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"/> External participant in a project or specific activity (according to the exhaustive list available in the procedure) | PROJ | Service responsible for the project/activity | 1 year |
| <input type="radio"/> Scientific activities of pensioners from institutes who have been previously USER | SCIE | EP department | 1 year |
| <input type="radio"/> Trainee invited directly by a department for an internship/job shadowing or participant in CERN's programs for highschool students | STAG | | 4 weeks |
| <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 responsibility 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 VISI.