

Application Form

WINE ADVISER (SOMMELIER) COURSE



A JOINDRE

- ✓ Copy of ID number
- ✓ 1 recent photo
- ✓ Certificat copy of your diplomas
- ✓ Letter explaining motivations and projects
- ✓ CV

photography

Personal Data

THIS APPLICATION SHOULD BE COMPLETED IN BLACK AND BLOCTC LETTERS

Family Name : _____ First Name : _____

Nom de jeune fille : _____ Nationality : _____

Date of Birth _____ Place of Birth _____ Age _____

Single

Married

Widower

Divorced

Partner

Number of children : _____

Permanent address : _____

Post Code : _____ City : _____ Country : _____

Home Phone N° : _____ Mobile Phone N° : _____

Mail address _____

CURRENT SITUATION :

Student in academic pursuits

Self-employed status _____

Employee termination status : _____

Current employee status : _____

Miscellaneous : _____

Réservé à l'administration

Personal Data

THIS APPLICATION SHOULD BE COMPLETED IN BLACK AND BLOCTG LETTERS

Profession du conjoint _____

Father's occupation _____ Mather's occupation _____

Driving license : oui non

Personnal car (type) : _____ Registration N° : _____

Recognized: disabled worker oui non

Réservé à l'administration

Adresse pendant la formation : _____

Ville : _____ Code postal : _____ Téléphone : _____

Previous Study

Institution	Period of study From To	Formation	Degree	Voie scolaire	Alternate Training Appren- ticeshippiy	Profession- nal trainig, Vocational training
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Professional Experience

Period From..... Of.....	Duration	Position	Company	Address

Internships and

Period From..... Of.....	Duration	Position	Company	Address

Language proficiency

Languages	Bilingual	Good level standard	Intermediate level	Basic knowledje
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How did you get information about WINE ADVISER (SOMMELIER) COURSE and CFPPA ?

Réservé à l'administration

- Règlement intérieur
- Attestation de couverture sociale
- Attestation d'assurance rapatriement
- Attestation d'assurance responsabilité civile
- Copie des diplômes

Date | _____ |

Signature

Applicate formation be sent to the following address :

**Lilia ALVAREZ,
Training Officer**

4, avenue du Parc

BP 10215

21206 BEAUNE CEDEX

Tél. : 03 80 24 79 95

cfppa.beaune@educagri.fr

Site WEB du CFPPA : www.cfppa.lavitibeaune.com