Application Form

To apply for the All-Atlantic Ocean Youth Ambassador programme, please complete and send the signed application form and your CV to person of contact of respective selecting partner with your supervisor or head in copy by **November, 8th, 2020**. Please note that we will use this data for the purpose of selecting an All-Atlantic Ocean Youth Ambassador under this programme only. More details can be found in the data protection notice attached which you are required to acknowledge.

## **Applicant Information:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  | |  | | | | |
|  | Last | | First | | | | |
|  |  | |  | | | | |
|  | Date of Birth | | Place of Birth | | | | |
| Address: |  | | | | | |  |
|  | Street Address | | | | | | Number |
|  |  | | | |  |  | |
|  | City | | | | ZIP Code | Country | |
| Phone: |  | Email: | |  | | | |
| Twitter: |  | Facebook: | |  | | | |
| Skype: |  | LinkedIn: | |  | | | |

**Emergency Contact:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Emergency contact Name: |  | |  | | | |
|  | Last | | First | | | |
| Emergency contact relationship to you: |  | | | | |  |
| Address: |  | | | | |  |
|  | Street Address | | | | | Number |
|  |  | | | |  |  |
|  | City | | | | ZIP Code | Country |
| Phone: |  | Email: | |  | | |

## **Language skills:**

Please provide us with details about your language skills:

|  |  |  |  |
| --- | --- | --- | --- |
| English | Mother tongue | fluent | basics |
| Specify Language here | Mother tongue | fluent | basics |
| Specify Language here | Mother tongue | fluent | basics |
| Specify Language here | Mother tongue | fluent | basics |

## **Current activities:**

Please give a short description (150 words maximum) of your current research or similar activities, including your institute or organisation and any relevant projects or activities you may be involved in.

Click or tap here to enter text.

## **Communication activities:**

Please give a short description (150 words maximum) outlining any relevant experience you have in communication activities. This may include presentations and posters, website design, social media, blogs, networking events, graphic design, making videos, volunteering, etc.

Click or tap here to enter text.

**Education and training:**

Please complete the fields that apply to you and provide a very short description for each on your trade (e.g. fisher) or academic (e.g. Ph.D) specialization.

|  |  |  |  |
| --- | --- | --- | --- |
| **Trade education:** |  | | |
| **Institution/Company:** |  | | |
| **Start date:** |  | **End date:** |  |
| **Short description:** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **PhD- programme:** |  | | |
| **University:** |  | | |
| **Start date:** |  | **End date:** |  |
| **Short description:** |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Master studies:** |  | | |
| **University:** |  | | |
| **Start date:** |  | **End date:** |  |
| **Short description:** |  | | |

**Motivational statement:**

Provide here your motivation (200 words maximum) in applying for the All-Atlantic Ocean Youth Ambassador Programme. Please include a statement on how you believe the ambassadorship could impact your career and what you would contribute to promoting the work of the All-Atlantic Ocean Research Alliance. You may also include examples of communication activities you would undertake in this role.

Click or tap here to enter text.

**Themes and activities:**

Specify here the specific activities you are interested in (150 words maximum):

Click or tap here to enter text.

**Ocean Commitment:**

Please describe your ocean commitment here, and explain what you wish to accomplish by being part of this Programme (Summer School and beyond) (150 words maximum):

Click or tap here to enter text.

**Recommendation or approval from your supervisor or head**

As the All-Atlantic Ocean Youth Ambassadors Programme will require your engagement for a period of approximately one year, it is necessary that your supervisor or head agrees that you take up this additional activity. Details of the expectations of the selecting institution are listed in the Terms of Reference.

|  |  |
| --- | --- |
| **Full name of the supervisor or head:** |  |
| **Position:** |  |
| **Contact details:** |  |
| **Email address:** |  |
| **How long have you known the applicant:** |  |

Please ask your direct supervisor or head to include a short recommendation or approval statement below:

Click or tap here to enter text.

Signature of the Supervisor/head: Signature of the Applicant:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Date:

Name: Name:

**Declaration of the Applicant:**

By submitting this Application Form, I, insert your name here , hereby certify that the information given is correct and complete.

I confirm that I am aware of the details and expectations of the All-Atlantic Ocean Youth Ambassador Programme. I also commit myself to participate actively in the preparation process, to work closely with partners in terms of reporting and delivering a strong Programme, and in the follow-up activities.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Data Protection Notice and consent form**

✍ Please read and sign below

In accordance with the Regulation (EU) 2018/1725 on the protection of natural persons with regard to the processing of personal data by the Union institutions, bodies, offices and agencies, and on the free movement of such data (Regulation), the AANChOR-CSA project and encompassed the All-Atlantic Ocean Ambassador programme, collects your personal information only to the extent necessary to fulfil a precise purpose related to our tasks.

# **Why do we collect your personal data?**

The **collection of the applicants’ personal data** is mandatory in the All-Atlantic Ocean Youth Ambassadors application form. The purpose of this processing operation is to collect information about the applicant for the purposes of the selection process and for the list of selected All-Atlantic Ocean Youth Ambassador contacts.

# **Who is responsible for this process?**

The AANChOR project is responsible for the initiative and is represented in this case by the All-Atlantic Ocean Youth Ambassador coordinator Dr. Isabelle Schulz, schulz@deutsche-meeresforschung.de.

# **What is the legal basis to collect your data?**

This processing activity, based on Article 5(1)(a) of the Regulation, is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in AANChOR by the following legal acts:

* European Commission granting of the CSA project: All AtlaNtic Cooperation for Ocean Research and Innovation, with the acronym **AANChOR**, selected under the BG-08-2018 call, Grant Agreement No. 818395 running from October 1st 2018 until September 30th 2022;

# **Which personal data are collected?**

The personal data collected through the application form include the following mandatory fields:

Title, Last Name,First Name Date of Birth, Address (Nationality E-mail address,Phone number, social media accounting, Emergency Contact full name, Address, E-mail and Phone number, Supervisor or head full name, Address, E-mail and Phone number, Education, training and/or professional Affiliation, the Field of expertise; Education, Training and Professional information, Language competences, other information related to ocean commitment, motivation and communication activities.

Other personal data may be collected in the future for the selected candidates:

Bank details and IBAN (for the purpose of payment of expenses), ID card/passport number and validity date (for the purpose of booking accommodation, travelling, other), other relevant information in the scope of the All Atlantic Ocean Youth Ambassadors programme, including photographs or videos. Participants that do not wish to be part of the above recording/publishing activities are given the possibility to opt-out.

If you do not agree with the publication of your personal data and/or presentation, please contact the All Atlantic Ocean Youth ambassador Programme coordination using the following email address: [schulz@deutsche-meeresforschung.de](mailto:schulz@deutsche-meeresforschung.de).

# **Who will have access to your personal data?**

# The data and information gathered through this Application form is accessible to authorised staff of the selecting partner that will conduct the selection process of all candidates.

# The personal data of the selected candidates will be transferred to all the AANChOR project partners, including third countries that are members of the project, specifically South Africa, Brazil, Argentina and Cape Verde, to the DG-RTD staff directly involved in the All Atlantic Ocean Youth Ambassadors Programme, to other nominating entities participating in the Programme, and to the Quality Assurance Board (QAB), in compliance with Chapter V of the regulation

# The processing of your data will not include automated decision-making (such as profiling).

# **How long do we keep your personal data?**

The All-Atlantic Ocean Youth Ambassador coordinator and other entities that have accessed your personal data, only keep the data for as long as follow-up actions produced by the All-Atlantic Ocean Youth Ambassador Programme activities are necessary, considering the purpose(s) of the processing of personal data: the training, the summer school, the events, the meetings and any other Atlantic mission activities taken up by the ambassadors When that period is over we will either delete your data or ask your permission to keep it in our database for future roles.

# **What are your rights?**

You have the right to access your personal data and to request your personal data to be rectified, if the data is inaccurate or incomplete; where applicable, you have the right to request restriction or to object to processing, to request a copy or erasure of your personal data held by all the entities that have dealt with the data. If you are a candidate, you should address the selecting entity. If you are a selected ambassador you should address the All-Atlantic Ocean Youth Ambassador coordinator Dr. Isabelle Schulz ([schulz@deutsche-meeresforschung.de](mailto:schulz@deutsche-meeresforschung.de)), that will convey your request to the other entities that have access to your data. If processing is based on your consent, you have the right to withdraw your consent at any time, without affecting the lawfulness of the processing based on your consent before its withdrawal. You may also exercise your rights of data portability. For more information consult the following articles of General Data Protection Regulation (GDPR): the right of Access: Article 15; the right of rectification: Article 16; the right to erasure Article 17; the right to restriction: Article 18; the right to data portability: Article 20; the right for objection: Article 21. You may exercise your rights by sending an e-mail to: [schulz@deutsche-meeresforschung.de](mailto:schulz@deutsche-meeresforschung.de).

# **Contact Information**

In case you have any questions about the collection/processing of your personal data, you may contact the All-Atlantic Ocean Youth Ambassador coordinator, Dr. Isabelle Schulz using the following email address: [schulz@deutsche-meeresforschung.de](mailto:schulz@deutsche-meeresforschung.de). If you wish to contact the data Controller use the AANChOR coordination e-mail address: info@allatlanticocean.org or alternatively you may contact the Data Protection Officer at Fundação para a Ciência e Tecnologia (FCT) using the following address: [rgdp@fct.pt](file:///C:\Users\User\Downloads\rgdp@fct.pt).

**Informed Consent form for the All-Atlantic Ocean Youth Ambassador Application:**

|  |
| --- |
| **CONSENT FORM**  Please check  I confirm that I have read and understand the information on the Data Protection Notice annexed to the Youth Ambassadors application form. I had the opportunity to consider the information, ask questions and have these answered satisfactorily.  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Name Date Signature |