

Users **Cooperation Associates Visiting Scientists**

REGISTRATION FORM AND CONTRACT

To be completed by the candidate			paini ya		THE RESERVE	Section 18 API II
Family name Schulte		Local address whilst at CERN (if known)				
First names		CERN HOSTEL				
Academic title		Telephone				
Gender: female male Date of Birth (Day/ Month/ Year): 01/11/1989 Town and country of birth fussen furming Nationality(ies)		Private address in the home country Kreben weg 7, 87459 Pfronten Germany Telephone 08363 15154				
Email scholle @mpp. mpg.de						
Marital status: X Single	Registered partnership	☐ Married [Lega sepa		Divorced	☐ Widowed
Accompanying family members Name	- V)			Date of Birth	Nationality(ies)
Spouse						
Children						
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	01		~ l			
Home institution (name/address): Ha	x-Planck -	Institute for	Physic	2		
Expected overall period of association wi	D.	L. KARAL	5 U	rich		
101	ringer Kir	90,0000	2/10/	7160		
Expected overall period of association wi	th CERN: from	110912016"	311 1	21.00	MT	
Average presence at CERN						
Internal address: Building Floor Office Tel Mobile						
Nature of activity at CERN: Scientific						
I understand and certify that: I will be an associated member of the personnel of CERN, subject to its Staff Rules and Regulations. As such, I will not be employed by CERN, nor covered by its social insurance scheme; for the entire duration of my contract of association with CERN, I will be: memployed by Date of appointment: * enrolled as a student at Munich in receipt of a grant from Supporting my association with CERN in receipt of a retirement pension from social insurance is the responsibility of my home institution and, that failing, of myself; in particular, I will make sure that I have medical insurance that is adequate in Switzerland and France for myself and accompanying family members, which shall include cover for occupational illness and accidents for me; I have adequate financial resources to support myself and accompanying family members. I will inform CERN of any changes in the foregoing, and understand that the consequences may include termination of my contract of association. Signature: * These options are not applicable to Visiting Scientists, who must be employed by their home institution or in receipt of a retirement pension						
To be completed by Team Leader (for Users) or Department Head (for Cooperation Associates and Visiting Scientists)						
For Users		tion Associates			4 (-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
The candidate will participate in the primary experiment A.T. A.S. other experiments	collaboration and the home		:RN	activities	didate will part s of my departn Unit:	
1						
Team account: 192700	-			Departn	nent Head	***************
Team Leader: BETHICE	Department I	lead	*********	Cia-at-		
Signature:	Signature:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		oignatu		

our name insutation is:

- Users: the institution with which CERN has concluded a Memorandum of understanding or equivalent agreement that covers your activities at CERN.

- Cooperation Associates: the institution with which CERN has concluded an agreement that covers your activities at CERN.

- Visiting Scientists: the research institution that employs you.

In case of doubt as to the identity of your home institution, contact your Team Leader / Supervisor or Department Head.



Name (See registration form overleaf) CERN CH – 1211 GENĖVE 23

To be completed by the User's Office and to be signed by the candidate								
	_	agrica by the surface of						
	Department-Group-Section: EP-UAT							
	CONTRACT OF ASSOCIATION							
	Personal –Confidential							
	On behalf of the Director-General of the European Organization for Nuclear Research, I am pleased to offer you a contract of association. This contract is subject to the following conditions:							
	Status User / Co	User / Cooperation Associate / Visiting Scientist						
	Duration of contract From.28.	From 28/11 / 16 to 2/12 / 16						
		long term contract short term contract (single stay of maximum 3 months, not renewable)						
	Duty station Geneva, S	Geneva, Switzerland						
	Average presence at CERN	1						
	Records Office in the Human Resources Department These conditions are based on the information yn professional or financial circumstances must be notiful accept this contract of association. Date: 28. 14. 2016	ou have supplied to CERN. Any change in your personal.						
	For the Users' Office							
	Date: .28	Signature: Audrey						
Iç	lentification No . [6.6.9.8.] CL	Processed: Date 28.11.16 Signature. Audrey						
	rof, Code	Verified: Date Signature						
Н	ome Institution Code33.56	27 K C [73 III] V						
C	Short-	term						
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		22000						
		E *						

¹ Article R II 1.11 of the Staff Regulations reads as follows: "In signing a contract with the Organization, members of the personnel shall accept its terms and agree to abide by the Rules and Regulations and to any subsequent amendment thereto by virtue of Articles S I 1.01 and 1.02, very outprejudice to their acquired rights. Employed members of the personnel shall receive a copy of the Rules and Regulations, and associated members of the personnel shall be guaranteed access to them."