

PROFESSIONAL DEVELOPMENT SUPPORT

APPLICATION FORM

All information will be treated confidentially

**Personal information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Surname |  |
| Adress |  | | |
| Postal code |  | City |  |
| Telephone |  | | |
| E-mail |  | | |
| Bank account/post account number |  | | |
| Bank’s name and address |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Birth date |  | Nationality |  |
| if Swiss, canton of origin |  | If foreigner living in Switzerland since |  |
| Residence permit: (chose the corresponding option)  B  C other, specify | | | |
| Dependent children | | | |
| yes  no if yes, how many | | | |

**Formal education**

|  |  |  |
| --- | --- | --- |
| Compulsory schooling: | | |
|  | from | to |
| Secondary school, high school, apprenticeship, etc: | | |
|  | from | to |
|  | from | to |
|  | from | to |
| Universities, other higher education institutions, etc: | | |
|  | from | to |
|  | from | to |
| Diplomas (certificates, high school diploma, etc): | | |
|  | from | to |
|  | from | to |

**Professional dance training**

|  |  |  |
| --- | --- | --- |
| Pre-professional training: | | |
|  | from | to |
|  | from | to |
| Professional training: | | |
|  | from | to |
|  | from | to |
| Diplomas: | | |
|  | | |
|  | | |

**Other training**

|  |  |
| --- | --- |
| Additional training (specific skills) or training followed in parallel to the work of professional dancer (type and duration): | |
|  | |
| Diplomas |  |
| Mother tongue |  |
| Knowledge of foreign languages: | |
| Spoken |  |
| Written |  |

**Professional activities**

|  |  |  |  |
| --- | --- | --- | --- |
| Main activities in professional dance (employer, work place, duration): | | | |
|  | | from | to |
|  | | from | to |
|  | | from | to |
|  | | from | to |
| Last / current employer |  | | |
| Contract since |  | | |
| Without work since |  | | |
| Have you carried out any professional activity outside of dance, specify: | | | |
|  | | from | to |
|  | | from | to |
|  | | from | to |
|  | | from | to |

**Retraining being considered**

|  |  |  |  |
| --- | --- | --- | --- |
| Kind of training: | | | |
|  | | | |
| Name of the training school/university/institution |  | | |
| Address |  | | |
| Contact person |  | | |
| Email |  | | |
| Tel |  | website |  |
| Training duration |  | | |
| Diploma / Title |  | | |
| Formation costs |  | | |
| Have you been accepted?  yes  no  If yes, please provide the admission confirmation. If no, specify the reply date | | | |

**This form has been filled out truthfully.**

Place       Date       Signature

Please attach the following documents:

Motivation letter\*

Documentation regarding the considered training

If possible, confirmation of admission

Programme and training calendar

Copy of the last decision from the Cantonal tax office

References and diplomas

This form must be sent by e-mail to[**contact@danse-transition.ch**](mailto:contact@danse-transition.ch)

**\*** Content of motivation letter – max. 1,5 pages

* Short personal description and professional path (max 15 lignes)
* Description of your career transition project
* Reasons of your request for a professional development support
* Explanation of the financial situation
* Amount asked