



ORDINE DEGLI
AVVOCATI DI MILANO

Progetto Stage Application Form

Personal Information

Name:

Surname:

Home Address:

Bar Association:

Phone:

Mobile:

Date of Birth (dd-mm-yyyy):

Fax :

Email:

Firm:

Preferred Destination (if any)

Please enter your preferred destination:

- 1.
- 2.

Required duration of the stage

3 months 6 months

Required timing of the stage

From (month/year) _____ to (month/year) _____

Languages known

Mother tongue(s)	Specify mother tongue (if relevant add other mother tongue(s), see instructions)						
Other language(s)							
CEFR (Common European Framework of Reference for Language) Language Language Language	Understanding		Speaking		Writing		
	Listening	Reading	Spoken interaction	Spoken production			



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University Education
1.
2.

Working Experience				
<i>Please enter any relevant work experience you have had in chronological order:</i>				
	Law Firm	Position held	From	To
1.				
2.				
3.				
4.				
5.				

Areas of practice and main activities carried out				
<i>Please enter any relevant work experience you have had in chronological order:</i>				
	Area	Kind of activity	My Involvement	Language used
1.				
2.				
3.				
4.				

Preferred Areas of practice for the stage			
1	2	3	4

Personal Note
<i>Please give details of the reasons of your application and further information you consider important:</i>

To be enclosed:

1. CV – please, use the Europass format <https://europass.cedefop.europa.eu/it/documents/curriculum-vitae>
2. Passport Picture

To be returned to crint.stage@ordineavvocatimilano.it.

In compliance with art. 13 - Decreto Legislativo 30 giugno 2003, n. 196 (“Codice in materia di protezione dei dati personali”) and art. 13 - Regolamento UE 2016/679 (“GDPR”) I hereby authorize you to use and process my personal details contained in this document and in my CV.

Luogo e Data _____ Nome e Cognome _____ Firma _____