

Experiment Associates

REGISTRATION FORM HOME INSTITUTION DECLARATION

HR-DHO-SPP - 30.09.2024

To be completed by the applicant to the Experiment Associate status ("the Expert")							
Family name (as indicated in passport) (in block capitals)		Local address whilst at CERN (if known)					
First names							
(as indicated in passport) (in block capitals)		Telephone					
Academic title (if any)		Private address in the home country					
Gender: female male Date of Birth (DD/MM/YY):							
Town and country of birth							
Nationality(ies)		Telephone					
Email							
Marital status: Single Registered partnership		☐ Married ☐ Legally ☐ Divorced ☐ Widowed separated					
Accompanying family members	Name, First name			Gender (f/m)	Date of Bir (DD/MM/YY	J ()	
Spouse							
Children			• •				
			••				
Highest qualification (diploma) incl.	discipline:					Year:	
Home institution ¹ (name/address):		Present position	on a	s emplovee	,	☐ Full-time	
		in the home institution:					
		Start date (DD/MM/YY):					
Expected period of association with CERN: from/ to/							
I understand that, as an associated member of the personnel of CERN, I will:							
be subject to its Staff Rules and Regulations;							
not be employed by CERN, nor covered by its social insurance scheme;							roo
 will benefit from a subsistence allowance paid by CERN to cover additional costs arising from my stay in the CERN local are pursuant to Staff Rule S V 1.01 b). 							
I understand that I must declare any financial benefit of a similar nature ² from an external source, as such benefit(s) may be deducted from my subsistence allowance.							/ be
•		DN as an Evnerin		. A a a a si a ta .			
For the entire duration of my contract of association with CERN as an Experiment Associate: 1. I must hold an employment contract with my home institution, on a full-time basis or on a part-time basis of at least 80%.							
Within the framework of this employment relationship, I certify that:							
I receive a regular salary from my home institution; I am severed by health and assident incurence including pretection against accumpational illnesses and assidents, which							
 I am covered by health and accident insurance, including protection against occupational illnesses and accidents, which provides adequate cover in Switzerland and France, as well as any countries visited on duty travel. It is the responsibility of 							
my home institution to provide and pay for such cover. If, for any reason, my home institution is unable to provide such cover,							
I must obtain it myself. Nevertheless, my home institution remains responsible for ensuring the presence and adequacy of my health and accident insurance cover, and for paying associated costs; and							
 My home institution provides me with retirement and disability pension insurance cover. 							
I will provide proof of employment and of the aforementioned insurance coverage upon request by CERN.							
2. I will have adequate financial resources to support myself, as well as any accompanying family members, throughout the duration of my stay in the CERN local area;							
3. Any accompanying family members will have health and accident insurance providing adequate cover in Switzerland and France.							
I will inform CERN of any changes in the foregoing and understand that such changes may result in termination of my contract of association.							
Name (in block capitals): Signature (by the Expert):							
Date (DD/MM/YY):							

 $^{^{1}\,\}mbox{Your home institution is the research institution that employs you.}$

² For the avoidance of doubt, such benefits do not include salary payments.

To be completed by an authorized representative of the competent administration of the home institution (Head of Human Resources Department or equivalent)

Home institution (full name):	
Address:	
Name and title of the Expert's supervisor at t	
·	the home institution (e.g. phone number, email):
The Expert will join CERN in the framework	of the collaboration agreement KN
The home institution certifies that it will ensu	re continued compliance by the Expert with conditions 1 to 3, set out above.
 ensure strict compliance with the institutions in respect of their person pay a regular salary to the Expert; provide, and pay for, health and a illnesses and accidents, which provident on duty travel. If, for any reason, responsible for ensuring that the Expertise provide retirement and disability per be responsible for the Expert's job of the home institution will provide proof of the 	ccident insurance cover to the Expert, including protection against occupational vides adequate cover in Switzerland and France, as well as any countries visited the home institution is unable to provide the Expert with such cover, it remains expert obtains it themselves and for paying associated costs; insion insurance cover for the Expert; definition, employment contract, performance assessment, career development. Expert's employment and insurance coverage upon request by CERN.
Date:	Signature:
	e signature: however, in case of contract modification or contract extension, a new HID will

Privacy Notice available via http://cern.ch/go/SJm8

be requested.