



Name of evaluator: _____

COMENIUS
ASSISTANTSHIPS (ASSISTANT)
COMMON EUROPEAN ELIGIBILITY CHECKLIST
2012

Reference N°

Name of the applicant:

	YES
The application has been submitted by the applicant by the published deadline.	
The application has been submitted using the correct application form.	
The application has been submitted according to the instructions published by the National Agency.	
The application has been submitted either in the country of residence or in the country of studies (the applicant signed a declaration that only one application has been submitted).	
The form is not hand written.	
The form is completed in full.	
The application has been completed using one of the official languages of the EU, or, in the case of the EFTA/EEA or candidate countries, in the national language of the country concerned.	
Either the country of origin or the country of destination is a Member State of the EU.	
The applicant is either a national of a country participating in the Lifelong Learning Programme or a national of other countries enrolled in regular courses in institutions of higher education, working or living in a participating country under the conditions fixed by each participating country.	
The applicant is domiciliated in a country participating in the Lifelong Learning Programme.	
The applicant either holds a teaching qualification or has completed at least two years of higher education studies which could lead to such a qualification.	
The applicant has not been previously employed as a teacher.	
The applicant has not previously received a Comenius Assistantship grant.	
The funded activity takes place in one of the countries participating in the Lifelong Learning Programme.	
The application form submitted to the National Agency bears the applicant's original signature.	
<i>(If applicable, add national administrative priorities)</i>	

The application is eligible: Yes
No

If the application is not eligible on the basis of one or several of the criteria above, please give details if necessary:

I hereby declare to the best of my knowledge that I have no conflict of interest (including family, emotional life, political affinity, economic interest or any other shared interest) with the person who has submitted this grant application. Furthermore, I confirm that I will not communicate to any third party any information that may be disclosed to me in the context of my work as an evaluator.

Date

Name and signature