



To be sent back, together with the ACAMS® application form, to the ATTF contact in your country by March 11th 2021.

Only **fully completed forms** will be considered.

APPLICATION FORM

Preparation Course to the CAMS® Certified Global Sanctions Specialist (CGSS) Examination Online Programme

Online Programme			
Dates:	Online seminar from 25 5 days divided in several some candidate with ACAMS)	sessions each day (8	
PERSONAL INFO	RMATION		
□Mr□M	rs		
First name:			
Last name:			
Employer :			
Position :			
Country :			
E-mail* :			
* This must be the e	email address with which th	ne candidate will atter	nd the online course.
ENGLISH LANGUA Faculty of handling Understanding	GE COMMAND the language, please choose Speaking	se from 1 <i>(poor)</i> to 5 Reading/Writing	(excellent)

STUDIES

Please start with last attended institution and proceed in reverse chronological order.

Name and location of the school / university	Years of study: from - to	Majors subjects

SESSIONS OF SPECIALIZATION

(During studies or professional career. If you have attended ATTF seminars in your country or in Luxembourg please add this information here.)

Institution	Date/Duration	Majors subjects





EMPLOYMENT

Please list your last 3 positions, **starting with the current / most recent one**.

1. Name of the employer (city, country)	Position title		
Main activity of organisation	From (month/year)	To (month/year)	
Nr of employees in the company :			
Nr of employees managed (if any):			
2. Name of the employer (city, country)	Position title		
Main activity of organisation	From (month/year)	To (month/year)	
Nr of employees in the company :			
Nr of employees managed (if any):			
3. Name of the employer (city, country)	Position title		
Main activity of organisation	From (month/year)	To (month/year)	
Nr of employees in the company :			
Nr of employees managed (if any):			

so indicate what career perspectives you see for yourself in the medium-term.	ion; please
hat are your motivations and expectations when applying for this seminar?)
ro you already member of ACAMS2 If you please provide your m	embership
Are you already member of ACAMS? If yes, please provide your monumber and its expiration date.	





Please, indicate the data that shall be mentioned on the invoice for the contribution fees <u>if you are selected</u>. <u>Latest deadline for payment is April 4th 2022</u>). The course material will only be sent to you after the invoice is paid.

Company:	
Street:	Nr :
City:	Zip code :
Country:	
•	ke to have the VAT number of your institution in the invoice, please ,the please ,th
☐ I would like to	attend this online programme and declare that:
	the following necessary technical equipment: a PC, reliable internet on, microphone and a webcam ;

By sending your application form you acknowledge that the House of Training is processing your personal data in order to organise your training. The House of Training is fully committed to the collection and treatment of your personal data in accordance with the General Data Protection Regulation (EU) 2016/679 (GDPR). You have the right to ask the House of Training, as the data controller, for access, for the rectification, for the erasure, for restriction of the processing or for objecting to the treatment of this data. Personal data may be communicated to the partners and the contractual subcontractors (processors) of the House of Training in the delivery of the services relating to the

I will attend all the sessions of the course and if I am not able to be present at some point, I will immediately inform the House of Training and its partner in my

Data processed by the House of Training concerning participants to its seminars include:

Their curriculum vitae,

Client's or the Participant's request.

country.

- Their application form,
- Their evaluation form.

The House of Training has put in place generally accepted standards of technological and organisational means for the purpose of guaranteeing the security of all the personal data it processes.

For more details please refer to our information notice on data protection by clicking on the following link: https://www.houseoftraining.lu/en_GB/page/protection-des-donnees-personnelles

Date:

IMPORTANT: Please save your application in the following format: country name_your family name_CGSS202204