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| Ε.4.3.2 ΑΠΟΓΡΑΦΙΚΟ ΔΕΛΤΙΟ ΕΠΩΦΕΛΟΥΜΕΝΟΥ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. ΑΤΟΜΙΚΑ ΣΤΟΙΧΕΙΑ** (Υποχρεωτική Συμπλήρωση) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Επώνυμο | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | Όνομα | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Πατρώνυμο | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | Αρ. Δελτίου Ταυτότητας | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Ημ/νία Γέννησης | | | | | | | \_\_/\_\_/\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | Τόπος Γέννησης | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Διεύθυνση Κατοικίας  Οδός-Αριθμός | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Τ.Κ.-Πόλη | | | | | | | | | | | | |  | | | | | | | | | | | |
| Τηλέφωνο –Κινητό-Fax | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
| E-mail | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Facebook – Skype/msn | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Οικογενειακή Κατάσταση | | | | | | | | | | | | Άγαμος | | | | | | | | | | | | | | |  | | |  | | | Έγγαμος | | | | | | | | | | | | | | | | | |  | |  | | | | | | |
| Στρατιωτικές Υποχρεώσεις | | | | | | | | | | | | Μη Εκπληρωθείσες | | | | | | | | | | | | | | |  | | |  | | | Εκπληρωθείσες | | | | | | | | | | | | | | | | | |  | |  | | | | | | |
| Υπηρετώ τώρα Ημ/νια Απόλυσης \_\_/\_\_/\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Άτομο με αναπηρία | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2. ΣΠΟΥΔΕΣ** (Υποχρεωτική Συμπλήρωση) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ίδρυμα | | |  | | | | | | | | | | | | | | | | | | | Σχολή | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Τμήμα | | |  | | | | | | | | | | | | | | | | | | | Κατεύθυνση | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Έτος Εισαγωγής | | | | | | | |  | | | | | | | | Έτος Αποφοίτησης | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | Βαθμός Πτυχίου | | | | | | | | |  | | | |
| Τίτλος Διπλωματικής εργασίας | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Κατάσταση | | | | Απόφοιτος (ALUMNI) | | | | | | | | | | | |  | | | | Τελειόφοιτος | | | | | | | | | | | |  | | Σπουδαστής | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Εξάμηνο: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Συμπληρώνετε κατά περίπτωση ανάλογα με την αιτιολογία της επίσκεψης Α,Β, Γ. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Α. Αίτηση για Εργασία στην Ελλάδα ή το Εξωτερικό** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ΜΕΤΑΠΤΥΧΙΑΚΕΣ ΣΠΟΥΔΕΣ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Πτυχίο | | | Τίτλος | | | | | | | | | | | | | | | | | | | | Ίδρυμα | | | | | | | | | | | | | | | | | | | | Έτη Σπουδών | | | | | | | | | | | | | | | | |
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| ΑΛΛΕΣ ΣΠΟΥΔΕΣ (ΑΕΙ, ΤΕΙ, ΙΕΚ) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Έτος | | | Ίδρυμα | | | | | | | | | | Σχολή | | | | | | | | | | Τμήμα | | | | | | | | | | | | | | | | | | Ειδικότητα | | | | | | | | | | | | | | | | | | |
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| ΕΠΙΜΟΡΦΩΣΕΙΣ-ΣΕΜΙΝΑΡΙΑ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Διάρκεια | | | | | | | | Αντικείμενο | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Σχολή – Ίδρυμα | | | | | | | | | | | | | | | | | | |
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| ΞΕΝΕΣ ΓΛΩΣΣΕΣ | | | | | | | | Επίπεδο Γνώσης | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Πτυχίο | | | | | | | | | | | | | | | | | | |
| ΑΓΓΛΙΚΑ | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| ΓΑΛΛΙΚΑ | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| ΓΕΡΜΑΝΙΚΑ | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| ΙΤΑΛΙΚΑ | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| ΙΣΠΑΝΙΚΑ | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| .......................... | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| ΓΝΩΣΕΙΣ Η/Υ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Γλώσσες Προγραμματισμού | | | | | | | | | | | | | | | | | Πακέτα Λογισμικού | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Λειτουργικά Συστήματα | | | | |
| Q Basic |  | | | | | HTML | | | | | | | |  | | Ms Office | | | | | | | |  | | | | Matlab | | | | | | | | | | |  | | Κεφάλαιο | | | | | | | | | | | | |  | Windows | |  | | |
| Visual Basic |  | | | | | Assembly | | | | | | | |  | | Autocad | | | | | | | |  | | | | Lab View | | | | | | | | | | |  | | Ορίζοντες | | | | | | | | | | | | |  | Unix | |  | | |
| C++ |  | | | | | Oracle | | | | | | | |  | | Corel Draw | | | | | | | |  | | | | Eurofasma | | | | | | | | | | |  | |  | | | | | | | | | | | | |  | Linux | |  | | |
| Java |  | | | | |  | | | | | | | |  | | Photoshop | | | | | | | |  | | | | Defacto | | | | | | | | | | |  | |  | | | | | | | | | | | | |  |  | |  | | |
| ΑΛΛΗ: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ΠΡΑΚΤΙΚΗ ΑΣΚΗΣΗ ΚΑΙ ΠΡΟΫΠΗΡΕΣΙΑ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Διάρκεια | | | | | | | Στοιχεία Επιχείρησης | | | | | | | | | | | | | | | | | | | Είδος Απασχόλησης | | | | | | | | | | | | | | | | | | | Θέση | | | | | | | | | | | | | | |
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| ΑΝΑΖΗΤΗΣΗ ΕΡΓΑΣΙΑΣ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Εργασιακή Σχέση | | Αορίστου Χρόνου | | | | | | | | | | | | | | | | | | | | | | |  | | | | Εποχική (Μόνο στο αντικείμενο) | | | | | | | | | | | | | | | | | | | | |  | | Μερική (Μόνο στο αντικείμενο) | | | | | | |  |
| Ορισμένου Χρόνου-Πρακτική Άσκηση | | | | | | | | | | | | | | | | | | | | | | |  | | | | (Αδιάφορο) | | | | | | | | | | | | | | | | | | | | |  | | (Αδιάφορο) | | | | | | |  |
| Εργαζόμενος | | | | | | | | |  | | Άνεργος | | | | | | | | | | | | | |  | | | | Επιθυμητή Χώρα: | | | | | | | | | | | | | | | Ελλάδα | | | | | |  | | Άλλη Χώρα:.......................................... | | | | | | | |
| Δίπλωμα οδήγησης | | | | | | | | |  | | Μεταφορικό Μέσο | | | | | | | | | | | | | |  | | | | Εξωτερικό | | | | | |  | |
| **Β. Εκπαιδευτική Πληροφόρηση** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ενημέρωση για: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Για Μεταπτυχιακές Σπουδές | | | | | | | | | | | | | | | | | | |  | | Για Υποτροφίες | | | | | | | | | | | | | | | |  | | | Για Κατατακτήριες σε Τριτοβάθμια Ιδρύματα | | | | | | | | | | | | | | | | |  | | |
| Για Σεμινάρια | | | | | | | | | | | | | | | | | | |  | | Για Επαγγελματικά Δικαιώματα | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | | |
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| ΧΩΡΑ ΜΕΤΑΠΤΥΧΙΑΚΟΥ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ΕΛΛΑΔΑ | | | | | | | | | | | | | | |  | | | ΓΑΛΛΙΑ | | | | | | | | | | | | | | | | | | | |  | | ΗΠΑ | | | | | | | | | | | | | | | | | |  | |
| Μ. ΒΡΕΤΑΝΙΑ | | | | | | | | | | | | | | |  | | | ΓΕΡΜΑΝΙΑ | | | | | | | | | | | | | | | | | | | |  | | ΑΛΛΗ: | | | | | | | | | | | | | | | | | | | |
| ΑΝΤΙΚΕΙΜΕΝΟ ΜΕΤΑΠΤΥΧΙΑΚΟΥ: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Γ. Συμβουλευτική Υπηρεσία** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ΑΙΤΙΟΛΟΓΙΑ ΕΠΙΣΚΕΨΗΣ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ατομικές συναντήσεις | | | | | Πληροφόρηση για τις δραστηριότητες της Συμβουλευτικής: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Συμβουλευτική σε προσωπικά θέματα: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Συμβουλευτική σε θέματα σταδιοδρομίας/ εκπαίδευσης (αναφέρετε το θέμα ΒΣ, ΜΠΣ κλπ): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| ΑμΕΑ (αναφέρετε το θέμα): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Συμβουλευτική με τη χρήση ψυχομετρικών εργαλείων: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Δράσεις mentoring: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Συμμετοχή σε ομάδες | | | | | Σύνταξη βιογραφικού/συνοδευτικής επιστολής -Τεχνικές εξεύρεσης εργασίας: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Προετοιμασία για συνέντευξη επιλογής προσωπικού: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Σύνταξη αυτοπεριγραφικής έκθεσης/ συστατικής επιστολής: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Προετοιμασία για συνέντευξη επιλογής για ΜΠΣ: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Δράσεις mentoring | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Άλλο (Σύλλογος ALUMNI): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| ΠΡΟΤΑΣΕΙΣ ΘΕΜΑΤΩΝ ΓΙΑ ΝΕΕΣ ΟΜΑΔΕΣ ΚΑΙ ΔΡΑΣΤΗΡΙΟΤΗΤΕΣ ΤΗΣ Σ.Υ. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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Δήλωση ακρίβειας και αποδοχής: Δηλώνω υπεύθυνα ότι αποδέχομαι τον Κώδικα Δεοντολογίας του Τμ. Διασύνδεσης, Διαμεσολάβησης & Καινοτομίας ΠΑ.Δ.Α. και εξουσιοδοτώ το Τμ. Διασύνδεσης, Διαμεσολάβησης & Καινοτομίας (Τ.Δ.Δ.Κ.) για την παροχή πληροφοριών που με αφορούν. Επιπλέον, επιθυμώ να λαμβάνω το ηλεκτρονικό περιοδικό του Τμ. Διασύνδεσης, Διαμεσολάβησης & Καινοτομίας (Τ.Δ.Δ.Κ.). Τα ευαίσθητα προσωπικά δεδομένα τα διαχειρίζεται ειδικά εξουσιοδοτημένο προσωπικό του Τμ. Διασύνδεσης, Διαμεσολάβησης & Καινοτομίας (Τ.Δ.Δ.Κ.) και μόνον.

Ημερομηνία Επίσκεψης:\_\_ /\_\_ /2022 Υπογραφή \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_