



Lifelong  
Learning  
Programme

Name of evaluator: \_\_\_\_\_

**COMENIUS**  
**ASSISTANTSHIPS (ASSISTANT)**  
**COMMON EUROPEAN ELIGIBILITY CHECKLIST**  
**2013**

**Reference N°**

**Name of the applicant:**

	<b>YES</b>
<b>The application has been submitted by the applicant by the published deadline (31 January 2013)</b>	
<b>The application has been submitted using the correct application form.</b>	
<b>The application has been submitted according to the instructions published by the National Agency.</b>	
<b>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).</b>	
<b>The form is not hand written.</b>	
<b>The form is completed in full.</b>	
<b>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.</b>	
<b>Either the country of origin or the country of destination is a Member State of the EU.</b>	
<b>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.</b>	
<b>The applicant is domiciliated in a country participating in the Lifelong Learning Programme.</b>	
<b>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.</b>	
<b>The applicant has not been previously employed as a teacher.</b>	
<b>The applicant has not previously received a Comenius Assistantship grant.</b>	
<b>The funded activity takes place in one of the countries participating in the Lifelong Learning Programme.</b>	
<b>The application form submitted to the National Agency bears the applicant's original signature.</b>	
<i>National Administrative Priorities</i>	
<b>Graduates or students who have completed at least two years of studies in education oriented departments of Greek universities or hold a degree</b>	

<b>of a peer university recognised by the Greek State.</b>	
<b>Graduates of other higher education departments with no education orientation but hold a degree from School of Pedagogical and Technological Education or are enrolled in (or have already graduated from) a post graduate study program related to teaching.</b>	

**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.*

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Date

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Name and signature