

 INTERNATIONAL OLYMPIC ACADEMY

52, Dimitrios Vikelas Avenue, 152 33 Halandri – Athens, Greece

**4th International Session for Olympic Medallists or Olympians**

**Monday, 2/7/2018 – Monday, 9/7/2018**

**PARTICIPANT’S PERSONAL HISTORY FORM**

 National Olympic Committee/Academy/IF/IOC Athletes’ Commission:

Surname: Date of Birth:

First name: Gender:

Nationality: Tel:

Address: E-mail:

Knowledge of languages

What is your mother tongue?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| KNOWLEDGE OF IOA OFFICIAL LANGUAGES | READ | WRITE | SPEAK | UNDERSTAND |
| Easily | Not easily | Easily | Not easily | Easily | Not easily | Easily | Not easily |
| ENGLISH |  |  |  |  |  |  |  |  |
| FRENCH |  |  |  |  |  |  |  |  |
| GREEK |  |  |  |  |  |  |  |  |

Which Discussion Group would you like to participate in? 🞏 English-speaking 🞏 French-speaking

|  |  |
| --- | --- |
| In which Olympic Games did you participate? |  |
|  |
|  |
| Sport(s): |  |
|  |  |
| Medal(s) or places won in Olympic Games: |  |
|  |  |

Medals awarded in world championships:

Education Give full details:

A. Secondary school, technical school or apprenticeship

|  |  |  |  |
| --- | --- | --- | --- |
| Name of institution, place and country | Type | Years attended | Main course of studies / Certificates or diplomas obtained |
| from | to |
|  |  |  |  |  |
|  |  |  |  |  |

B. Bachelor Studies

|  |  |  |  |
| --- | --- | --- | --- |
| Name of institution, place and country | Type | Years attended | Certificates or diplomas obtained |
| from | to |
|  |  |  |  |  |
|  |  |  |  |  |

C. Postgraduate studies

|  |  |  |  |
| --- | --- | --- | --- |
| Name of institution, place and country | Type | Years attended | Certificates or diplomas obtained |
| from | to |
|  |  |  |  |  |
|  |  |  |  |  |

D. PhD studies

|  |  |  |  |
| --- | --- | --- | --- |
| Name of institution, place and country | Type | Years attended | Certificates or diplomas obtained |
| from | to |
|  |  |  |  |  |
|  |  |  |  |  |

Current profession:

|  |
| --- |
| Have you been involved with any educational program implemented by your country’s NOC or NOA? |
|  |
|  |

|  |
| --- |
| Career as a sports official: (Please list duties assumed within a club or at a regional, national or int’l level) |
|  |
|  |

|  |  |
| --- | --- |
| State in 5 lines why you wish to participate in the IOA Session:  |  |
|  |
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|  |  |
| --- | --- |
| Remarks:  |  |
|  |
|  |

DATE: SIGNATURE (Participant):

Confirmed by the NOC/NOA/IF of SIGNATURE & OFFICIAL SEAL:

/Athletes’ Commission

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***Note:*** *Please return this questionnaire, fully completed and officially signed and sealed,*

*to the International Olympic Academy by* ***Friday 30 March 2018****.*

***Preferably by e-mail****:* *m.katsadoraki@ioa.org.gr* *OR by post: 52, Dimitrios Vikelas Avenue,*

*152 33 Halandri – Athens, Greece.*

*Please include two recent passport-size photos (electronic or hard copies).*