## **CURRICULUM VITAE**

## OF THE CANDIDATE TO THE BOARD OF DIRECTORS

| 1.             | Background information:           |                          |                | (4x6, taken within the last 06 months) |  |  |  |  |
|----------------|-----------------------------------|--------------------------|----------------|--|--|--|--|--|
|                | • Full name: .                    |                          |                |  |  |  |  |  |
|                | <ul> <li>Date of birt</li> </ul>  |                          |                |  |  |  |  |  |
|                | <ul> <li>Place of birt</li> </ul> |                          |                |  |  |  |  |  |
|                | • Gender:                         |                          |                |  |  |  |  |  |
|                | Nationality:                      |                          |                |  |  |  |  |  |
|                | ID Card/Passport No: issued on by |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
| Telephone No.: |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
| 2.             | 2. Education and Training:        |                          |                |  |  |  |  |  |
|                | Year                              | Schools/Training centers | Degrees        |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
| 3.             | <u>Professional e</u>             | xperiences:              |                |  |  |  |  |  |
|                | Year                              | Position                 | Name of Organi | zation                                 |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
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|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |
|                |                                   |                          |                |  |  |  |  |  |

o Reward, discipline (if any):

## 4. Related persons:

(Declaring members in the candidate's family: Biological parents, adoptive parents, spouses, biological siblings, biological and adopted children).

| No. | Full name | Relationship | Occupation/ Position | Workplace |
|-----|-----------|--------------|----------------------|-----------|
|     |           |              |                      |           |
|     |           |              |                      |           |
|     |           |              |                      |           |
|     |           |              |                      |           |
|     |           |              |                      |           |

| hereby undertake that the aforementioned declaration is fully truthful and ac<br>be liable before laws. | ccurate. In case of any untrut | hful information, I will |
|---|--------------------------------|--------------------------|
|   | (Signature, full name          | , 2025<br>)              |
|   |                                |                          |
|   |                                |                          |