

Service phone number: 0911/178-7915 (Monday - Thursday 8:00 am - 16:00 pm, Friday 08:00 am- 13:00 pm)

Skills Survey Questionnaire

Dear Sir or Madam,

The Federal Employment Agency (*Bundesagentur für Arbeit*, BA) welcomes you to Germany.

As the public provider of employment services, our main task is to bring together those looking to do a vacancies.

The German labour market is looking for skilled workers with vocational training or studies as well as jobs as helpers where you do not need any training. We would like to support you in getting started with work.

If you wish to participate, we will need some personal details as well as information on your qualifications and work experience. For this, please fill out the questionnaire on the next page and hand it in at your community accommodation centre. The questionnaire will then be forwarded to the competent Employment Agency. On the basis of your skills profile, the Employment Agency will carry out an initial assessment of your prospects for finding a job. In the event of a positive evaluation, the Employment Agency will contact you and arrange a personal appointment.

We're looking forward to learning more about you.

Yours sincerely,

The Federal Employment Agency

The BA undertakes to comply with data protection regulations. Your data will only be collected, processed and used in the context of the statutory remit (Second Volume of the Social Code, Third Volume of the Social Code) for the purposes of potential analysis, guidance, placements as well as active employment promotion.

Data Protection Statement

I consent to the BA collecting, processing and using the data collected in the survey questionnaire in accordance with its statutory remit (Second Volume of the Social Code, Third Volume of the Social Code) and for research purposes. I also agree that prior to commencing placement measures in the labour market, the BA may obtain details from the Federal Office for Migration and Refugees regarding the position of the asylum application process for the purposes of determining the prospects for residency. This consent can be revoked at the competent Employment Agency at any time with effect for the future without giving any reason.

First name, Family name

Place, Date

Signature

Title:	<input type="checkbox"/> Mrs / <input type="checkbox"/> Mr	Date of Immigration to Germany:	____.____.20____
Family Name:		First Name:	
Date of Birth:		Place of Birth:	
Status as Refugee:		Work Permit	<input type="checkbox"/> Yes <input type="checkbox"/> No

Contact Information									
Street, Building Number:									
Postal Code and Place:									
Telephone (optional):				E-Mail (optional)					
Desired Occupation									
Qualifications						Completed		Qualification	
	Country	Type, Name and Address of the Institution	Beginning / End Day / Month / Year	Yes	No	Yes	No		
School Attendance				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Vocational Training				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Higher Education				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Professional Experience									
Beginning/End (Day / Month / Year)			Type of Work / Profession						
Languages	Basic Knowledge		Advanced Knowledge		Proficient				
_____	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
German	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
English	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
German Course	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Institution						
Beginning / End				Level					

Please send this skills survey questionnaire to Neuwied.111-Eingangszone@arbeitsagentur.de

Bitte senden Sie diesen Erfassungsbogen an Neuwied.111-Eingangszone@arbeitsagentur.de