



**SNE.FORM 1**

**INFORMATION PROVIDED BY EMPLOYER ON NATIONAL EXPERT SECONDED TO eu-LISA**

(Decision of the eu-LISA Management Board 15 August 2012, Chapter III)

Surname: \_\_\_\_\_ First name: \_\_\_\_\_  
 Place and country of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
 Nationality: \_\_\_\_\_ Marital status: \_\_\_\_\_  
 Date of start of secondment: \_\_\_\_\_ Length of secondment: \_\_\_\_\_  
 Level of security clearance: \_\_\_\_\_ (Art. 6 para. 6: official certificate to be provided if separately requested)

\* \* \*

It is hereby certified that during the period of secondment the person concerned will remain subject to the social security legislation applicable to the public administration which employs him. (Art. 11)  
 It is hereby declared that on the basis of the tasks entrusted to our employee, we know no reason why he/she should not be assigned to the duties of \_\_\_\_\_ during the period of secondment.

**SUPPLEMENTARY INFORMATION**

1. Gross annual salary (\*)

AMOUNT	CURRENCY

2. Amount of any national allowance similar to the daily subsistence allowance **to be paid** to the National Expert during his/her secondment **by Employer** (art. 17):

(if **no allowances** will be paid, please state **NONE**)

AMOUNT	CURRENCY

3. Should the daily subsistence allowance be paid by eu-LISA? : YES  NO

4. Place of employment prior to secondment (city, country): \_\_\_\_\_

5. Place of residence 6 months before secondment (city, country): \_\_\_\_\_

6. Will the national authorities cover :

- Travel expenses upon entry into service? YES  NO
- Travel expenses upon termination of service? YES  NO

Done at \_\_\_\_\_ on \_\_\_\_\_

Certified as true and correct  
 Signature and stamp of national authority

(\*) to be defined in accordance with national regulations: this amount does not include family allowances.