



To be completed by an authorized representative of the candidate's home institution for the purpose of issuing the candidate a contract of association with CERN

Full name of the candidate:.....

Name and address of the home institution: .....

.....

Expected overall period of association with CERN (*Day/ Month/ Year*): from ..... to .....

I certify that, for the entire duration of the candidate's contract of association with CERN, he/she will be:

- employed by .....
- \* enrolled as a student at .....
- \* in receipt of a grant from ..... supporting his/her association with CERN
- in receipt of a retirement pension from .....

*\* These options are not applicable to Visiting Scientists who must be employed by their home institution or in receipt of a retirement pension.*

I understand and certify that, for the entire duration of the candidate's contract of association:

- He/she will be an associated member of the personnel of CERN, subject to its Staff Rules and Regulations. As such, he/she will not be employed by CERN, nor covered by its social insurance scheme;
- He/she has adequate financial resources<sup>1</sup> to support him/herself, as well as any accompanying family members, throughout the duration of their stay in the local area;
- The social insurance cover of the candidate is the responsibility of the home institution. It must include health and accident insurance (including protection against occupational illnesses and occupational accidents) providing adequate cover in Switzerland and France, as well as any countries visited on duty travel;
- If, for any reason, the home institution is unable to provide the candidate with such health and accident insurance, he/she must obtain it him/herself. Nevertheless, the home institution remains responsible for ensuring its presence and adequacy;
- Any accompanying family members must have health and accident insurance providing adequate cover in Switzerland and France;
- The home institution shall ensure strict compliance with the conditions set out above.

The home institution will inform CERN of any changes in the foregoing and understands that such changes may result in termination of the candidate's contract of association with CERN.

Date (Day/Month/Year): ..... Signature : .....

Full name (in block capitals): .....

Stamp: ..... Position at home institution: .....

*(Fill out in English or French)*

*The HID is valid for six months after the date of signature; in case of registration, contract modification or contract extension six months after this date, a new HID is requested.*

<sup>1</sup> The home institution is:

- Users: the institution with which CERN has concluded a Memorandum of Understanding or equivalent agreement that covers his/her activities at CERN.
- Cooperation Associates: the institution with which CERN has concluded an agreement that covers his/her activities at CERN.
- Visiting Scientists: the research institution that employs him/her.

<sup>2</sup> A definition of "adequate financial resources" in the context of this form is provided at the following link: