

Employer's name

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Démarche : Registration form for the international training cycle related to the organization of parliamentary work - 16 to 20 November 2026 session : Division de la coopération interparlementaire Organisme Identité du demandeur **Email** Civilité Nom Prénom **Formulaire** This form aims to allow registration for the participants for the english-speaking training session on parliamentary work organised by the French Parliament from the 16th to the 20th of November, 2026 **Contact information** E-mail address Telephone number Date of birth Country of birth Town of birth **Nationality Employer details**

Registration form for the international training cycle related to the organization	of parliamentar
Employer's email address	
Employer's address	
Position held	
Previous position(s) held Previous position(s) held	
Previous position(s) held	
Previous position(s) held	
Academic experience and qualifications	
Academic experience / diploma Academic experience / diploma	
Academic experience / diploma	
Academic experience / diploma	
Additional experience(s) you would like to share (thesis, etc.)	
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Languages	
Languages Cochez la mention applicable, plusieurs valeurs possibles French (spoken)	
French (written)	
English (spoken)	
English (written)	
Other language(s)	
Funding	

For your information

Registration form for the international training cycle related to the organization of parliamentary in order to facilitate the organization of the program, it is the candidate's responsibility to obtain all the financial guarantees necessary for his or her participation (covering travel and accommodation costs in particular). Should you need a French Government grant, registration for the program will be confirmed upon transmission, via the platform, of a document justifying receipt of the grant. It is your responsibility to apply individually and directly to the French Embassy in your home country.

Type of funding (transport and accommodation) Cochez la mention applicable, une seule valeur possible Personal resources	
By the employer (provide official confirmation by the employer below)	
French government grant (provide proof of receipt below)	
Pièce justificative à joindre en complément du dossier Confirmation of grant (if applicable)	
Motivations	
Motivations for this program, in relation to the position held	
Have you already taken part in a training program organised by the French Parliament? Cochez la mention applicable, une seule valeur possible Yes	
□ No	
If yes, please specify which course and on which date	
Publicity rights	
I declare that I am aware of the fact that, as part of my participation in the training programme organised by the National Assembly and the Senate, my image may be captured on photographs or video and that all the photographs or video produced may give rise to one or more broadcasts on the social networks and websites of the French Nation Assembly and the Senate. I hereby expressly authorise the National Assembly and the Senate to record, reproduce, distribute and use these photographs and videos, free of charge, as part of their activities to promote parliamentary training programmes. I hereby guarantee the National Assembly and the Senate against any recourse that may be brought by natural or legal persons who consider that they have any rights whatsoever in the use of my image and what may object to their distribution. Cochez la mention applicable Oui	al
□ Non	

Participation in the alumni network

Je souhaite faire partie du réseau des anciens élèves et recevoir les communications relatives à ce réseau. Par voie de conséquence, j'autorise les divisions en charge de la coopération interparlementaire de l'Assemblée nationale et du Sénat à conserver mes coordonnées à cette fin.

I wish to be part of the alumni network and receive communications relating to this network. To this end, I authorise

Registration form for the international training cycle related to the organization of parliamentary the divisions in charge of interparliamentary cooperation at the Senate and the National Assembly to keep my contact details. Cochez la mention applicable Oui
□ Non
Insurance cover
For your information All participants must have medical insurance including cover for medical expenses and repatriation in the event of illness or accident. The French Parliament is not responsible for and will not cover medical and repatriation costs. By registering and ticking this box, you acknowledge and accept this condition.
I declare on my honour that I have medical insurance covering medical expenses and repatriation in the event of illness or accident. Cochez la mention applicable Oui
□ Non
Attachments
Pièce justificative à joindre en complément du dossier ID Photo
Pièce justificative à joindre en complément du dossier Curriculum vitae
Pièce justificative à joindre en complément du dossier Letter of recommendation (optional)

Legal information

The information collected on this form is intended for the administrative and educational management departments of the National Assembly and the Senate, which are jointly responsible for processing it, in order to register and monitor students in the English-speaking training course on the organization of parliamentary work. Data will be kept on our active database for a period of 12 months. In accordance with Regulation (EU) 2016/679 of the European Parliament and of the Council of April 27, 2016, General Data Protection Regulation (GDPR) and Law No. 78-17 of January 6, 1978, as amended, relating to data processing, files and freedoms, you have the right to access, rectify, delete, oppose, limit the processing and portability of data, which you may exercise by sending an email to dpo@assemblee-nationale.fr and/or dpd@senat.fr.