

# European Qualifications Passport for Refugees QUESTIONNAIRE

Thank you for participating in the project "European Qualifications Passport for Refugees". The aim of this project is to evaluate qualifications of refugees, even for those who cannot fully document their qualification.

# Please take your time to carefully and clearly fill in this questionnaire.

If the questionnaire is accepted, in the following weeks you will be contacted to take an **interview** with a team of credential evaluators.

The interview itself takes between 45 minutes to one hour, after which a decision on whether or not to issue the document is made. If the decision is positive, the **European Qualifications Passport for Refugees** is issued in your name and is valid for five years from the date of issue.

**The European Qualifications Passport for Refugees** is a document providing an assessment of higher education qualifications based on available documentation and a structured interview. It also presents information on your work experience, language proficiency and provides reliable information for integration and progression towards employment and admission to further studies.

# Please make sure you:

- WRITE CLEARLY
- GIVE AS MUCH DETAILED INFORMATION AS POSSIBLE
- ATTACH ANY DOCUMENTATION RELEVANT FOR EVALUATING YOUR QUALIFICATION (degree certificate, transcript of records, graduation diploma, language or other relevant certificates, student ID, thesis / research work, CV etc.)

Once you have completed the questionnaire, please send it to: refugees.qualifications@coe.int

PLEASE NOTE THAT WE MIGHT CONTACT YOU FOR MORE INFORMATION. IN SOME CASES, THE INTERVIEW MIGHT BE CONDUCTED USING SKYPE.

For more information, please visit: http://www.coe.int/eqpr



Questionnaire to be completed by the participants in the pilot project PLEASE WRITE CLEARLY USING CAPITAL LETTERS		
1. PERSON	AL INFORMATION	
Last name:		РНОТО
First and middle name:		
Date of birth:		
Place of birth:		
Father's name:		
Mother's name:		
Nationality:		
Gender:		
Asylum service card number (where applicable):		
Any previous names:		
PLEASE REMEMBER TO ATTACH	PROOF OF NAME CHANGE PY OF YOUR ASYLUM CAR	
	CT INFORMATION	<u></u>
Street address:		
Postcode:		
Place and Country:		
E-mail address:		
WE WILL CO	NTACT YOU BY EMAIL	
Phone number:		
Other means of contact (Whatsapp, Viber, Facebook et	c.):	
3. LAN		
Have you studied / had exams in English?	YES	NO
The courses were taught in English:	YES	NO
I have TOEFL/IELTS or other English test certificate:	YES	NO
I have English exam from Upper Secondary School:	YES	NO
Other English education:		



Do you participate in a	a language course now?		YES			NO		
If yes, at which level?								
What is your native lar	nguage?							
What other languages	do you speak?							
What other languages	do you write?							
PLE	ASE REMEMBER TO ATTAC	<mark>H COPY</mark>	OF LANGUAGE PR	OFIC	<mark>CIENCY TEST, IF</mark>	APPLICA	<mark>BLE</mark>	
4.	WHAT LEVEL OF EDUC		N DO YOU HAV	/E? F	Please indica	ate belo	w	
Primary education	Secondary education		oper-Secondary tion (High		2 Professional niversity) educ			gher education rsity) degree
			1)	C				
NB: If this is your highest lev refugees.qualifications@coe.in	vel of education, please contact nt for more information	level o	is your highest of education, e fill in the part	lev	this is your hi vel of educatio ease fill in the 2	n,	level of	is your highest f education, fill in the part
	4. 1 Upper-Secor	-						
4.1.1 General Inform	<mark>only if you indicated Up) (only if you indicated Up)</mark> Mation About Your Up					ation)		
	tarted – year completed:	-			-			
Name of the certificate	e:							
School, educational in	stitution:							
Place and country:								
4.1.2 Scope and Lev	vel							
Nominal length of stud	dy:							
Have you completed t normal time?	he programme within the	e	YES C			NO		]
Explanation of any del education:	ay or interruption of							
What was the entranc education?	e requirement for this							
-	ve access to further study qualification was earned	•						
Was this education co	mpulsory?		YES			NO		



What was the language of instruction?	
How old were you when you took this education?	
(from year – to year)	
Did you have to choose a stream? If so, what stream did you choose?	
Could you apply to university / higher education with this qualification?	

4.1.3 Subjects

Please provide the list of the subjects you studied during this study YOU NEED TO COMPLETE PART 4.1.3 EVEN IF YOU HAVE SUBMITTED YOUR TRANSCRIPT



4.1.4 Exams

Please provide the list of the final exams you took YOU NEED TO COMPLETE PART 4.1.4 EVEN IF YOU HAVE SUBMITTED YOUR CERTIFICATE



4.1.5 Average mark

Please provide the information about your average mark YOU NEED TO COMPLETE PART 4.1.5 EVEN IF YOU HAVE SUBMITTED YOUR CERTIFICATE



4. 2 Professional (non-university) education (only if you indicated Professional education as your highest level of education –		
if you have a university degree, please proceed to 4.3)		
4.2.1 General Information About Your Upper-See	condary Education	
Period of study: year started – year completed:		
Name of the certificate:		
Name of school, educational institution:		
Place and country:		
4.2.2 Scope and Level		
Nominal length of study:		
Have you completed the programme within the normal time?	YES NO	
Explanation of any delay or interruption of education:		
What was the entrance requirement for this education?		
What was the language of instruction?		
How old were you when you took this education? (from year – to year)		
Did you have practical training during this study? Please indicate the place and name of the organization where you had you practical training		
What kind of qualification did you earn at the end of you studies?		
What are the possible fields of application of your qualification? Where and in which capacity you can work in the country where your qualification is obtained?		
Could you apply to university / higher education with this qualification?		



4.2.3 Subjects

Please provide the list of the subjects you studied during this study YOU NEED TO COMPLETE PART 4.2.3 EVEN IF YOU HAVE SUBMITTED YOUR TRANSCRIPT



4.2.4 Exams

Please provide the list of the final exams you took YOU NEED TO COMPLETE PART 4.2.4 EVEN IF YOU HAVE SUBMITTED YOUR CERTIFICATE



4.2.5 Average mark

Please provide the information about your average mark YOU NEED TO COMPLETE PART 4.2.5 EVEN IF YOU HAVE SUBMITTED YOUR CERTIFICATE



4.3 Higher education (university) degree		
4.3.1 General Information about your Higher education (university) degree		
Period of study: year started – year completed:		
Name of the awarded degree:		
Educational institution, university:		
Place and country:		
4.3.2 Scope and Level		
Nominal length of study:		
Have you completed the programme within the normal time?	YES NO	
Explanation of any delay or interruption of education:		
What was the entrance requirement for this education?		
Does this education give access to further study in the country where the qualification was earned?		
Did you study full time or part time?	Full time	
What was the language of instruction?		
4.3.3 Please state the purpose of your education	:	
4.3.4 Specialization		
Did you have a specialization?		
Was this education aimed at working within a particular profession? If so, which one?		



4.3.5 Practice		
Did your study include a job practice component?		
YES If the answer is YES, please answer the ne	ext auestion	NO If the answer is NO, please continue to 4.6.
Was job practice a mandatory componen		
YES		NO
Where did you have your job practice?		
Tasks?		
In which period of the education?		
Duration of the job practice:		
4.3.6 Thesis		
Did your degree include a thesis/project of	component?	
YES		NO L
Please answer the questions below if you or worked with the project	wrote a thesis	If the answer is NO, please continue to 4.7.
Title of the thesis/project:		
Nominal length of study given to work with the thesis/ project:		
Number of pages:		
Please give a short description of the thesis' or project's contents:		





### **4.3.7** Reconstruction of the Course Descriptions

Please give as detailed description of the courses in your education as possible. You are to choose TWO IMPORTANT SUBJECTS FROM EACH SCHOOL YEAR (e.g.: if you have studied for four years, you are to describe eight subjects). Each subject gets one page. Please use extra paper if you need to.

### YOU NEED TO COMPLETE PART 4.3.7. EVEN IF YOU HAVE SUBMITTED YOUR TRANSCRIPT

1 <sup>st</sup> school year	
SUBJECT NO. 1	
Name of course / subject:	
Textbook (if you remember):	
Which school year/semester did you take this subject?	
Was this subject a part of your specialization?	
Please give a description of what you learned about	in this course (min. 300 characters):





1 <sup>st</sup> school year	
SUBJECT NO. 2	
Name of course / subject:	
Textbook (if you remember):	
Which school year/semester did you take this subject?	
Was this subject a part of your specialization?	
Please give a description of what you learned about in	n this course ( <b>min. 300 characters</b> ):





2 <sup>nd</sup> school year		
SUBJECT NO. 1		
Name of course / subject:		
Textbook (if you remember):		
Which school year/semester did you take this subject?		
Was this subject a part of your specialization?		
Please give a description of what you learned about in this course (min. 300 characters):		





2 <sup>nd</sup> school year	
SUBJECT NO. 2	
Name of course / subject:	
Textbook (if you remember):	
Which school year/semester did you take this subject?	
Was this subject a part of your specialization?	
Please give a description of what you learned about ir	n this course ( <b>min. 300 characters</b> ):





3 <sup>rd</sup> school year	
SUBJECT NO. 1	
Name of course / subject:	
Textbook (if you remember):	
Which school year/semester did you take this subject?	
Was this subject a part of your specialization?	
Please give a description of what you learned about ir	n this course ( <b>min. 300 characters</b> ):





3 <sup>rd</sup> school year	
SUBJECT NO. 2	
Name of course / subject:	
Textbook (if you remember):	
Which school year/semester did you take this subject?	
Was this subject a part of your specialization?	
Please give a description of what you learned about ir	n this course ( <b>min. 300 characters</b> ):





4 <sup>th</sup> school year				
SUBJECT NO. 1				
Name of course / subject:				
Textbook (if you remember):				
Which school year/semester did you take this subject?				
Was this subject a part of your specialization?				
Please give a description of what you learned about ir	n this course ( <b>min. 300 characters</b> ):			



4 <sup>th</sup> school year				
SUBJECT NO. 2				
Name of course / subject:				
Textbook (if you remember):				
Which school year/semester did you take this subject?				
Was this subject a part of your specialization?				
Please give a description of what you learned about in this course (min. 300 characters):				
	TACH RELEVANT DOCUMENTS			
(tnesis / research work, biblic	ographies, student ID card etc.)			



# **5. YOUR EDUCATION HISTORY**

# **Pre-Primary education**

Name of school:	
Name of the Certificate:	
Length of program:	
Age of entry:	
Age of exit:	
Year of entry:	
Year of exit:	
Finished (YES / NO) :	

# **Primary education**

Name of school:		
Name of the Certificate:		
Length of program:		
Age of entry:		
Age of exit:		
Year of entry:		
Year of exit:		
Finished (YES / NO) :		



Secondary education				
Name of school:				
Name of the Certificate:				
Length of program:				
Age of entry:				
Age of exit:				
Year of entry:				
Year of exit:				
Finished (YES / NO) :				
Vocational education				
Name of school:				
Name of the Certificate:				
Length of program:				
Age of entry:				
Age of exit:				
Year of entry:				
Year of exit:				
Finished (YES / NO) :				

Г



# Higher education Name of school: Name of the Certificate: Length of program: Age of entry: Age of exit: Year of entry: Year of exit: Finished (YES / NO) :



	<u> </u>						
Have	e you had work	experier	nce after you finished	d your educat 	cion?		
	YES		NO				
		<mark>Please a</mark>	nswer the questions	<mark>; below if you</mark>	<mark>have had</mark>	work experience	
	iod of work,	Em	ployer, country	Position,	, tasks		ld you make use
-	ar started –					of your e	ducation?
ye	ear finished						
Hav	ve you had mer	nbership	in a profession orga	nization?		<u> </u>	
	YES		NO 🖵				
	Please send your CV and copies of documentation of your work experience, if you have it						
			7. FUR	THER EDUCA	TION		
Have	Have you completed any further education /courses?						
	YES		NO				
No.	Period of S	Study	Institution / Org	anization	Qualifica	tion, subject area	Place, country
1.							
2.							
3.							



## 8. OTHER RELEVANT INFORMATION

# 9. SIGNATURE

I have read and understood the leaflet including information related to the project on the "European Qualifications Passport for Refugees" and I consent in the use of my data for the purposes of this project.

I agree that the Council of Europe will contact me again to evaluate the results of the EQPR project. For that purpose the Council of Europe may keep a record of my contact details and of the EQPR document.

Furthermore, I confirm that the information I have given in this questionnaire and enclosures is correct.

Place:	Date:	Please write your name in CAPITAL LETTERS:

SIGNATURE:

Once you have completed the questionnaire, please send it to:

refugees.qualifications@coe.int