

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. PERSONAL INFORMATION

Last name:	PHOTO
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, IF APPLICABLE
 PLEASE SEND A COPY OF YOUR ASYLUM CARD**

2. CONTACT INFORMATION

Street address:	
Postcode:	
Place and Country:	
E-mail address:	
WE WILL CONTACT YOU BY EMAIL	
Phone number:	
Other means of contact (Whatsapp, Viber, Facebook etc.):	

3. LANGUAGE SKILLS

Have you studied / had exams in English?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
The courses were taught in English:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
I have TOEFL/IELTS or other English test certificate:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
I have English exam from Upper Secondary School:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Other English education:				

Do you participate in a language course now?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If yes, at which level?		
What is your native language?		
What other languages do you speak?		
What other languages do you write?		

PLEASE REMEMBER TO ATTACH COPY OF LANGUAGE PROFICIENCY TEST, IF APPLICABLE

4. WHAT LEVEL OF EDUCATION DO YOU HAVE? Please indicate below

Primary education	Secondary education	4.1 Upper-Secondary education (High School)	4.2 Professional (non-university) education	4.3 Higher education (university) degree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NB: If this is your highest level of education, please contact refugees.qualifications@coe.int for more information		If this is your highest level of education, please fill in the part 4.1	If this is your highest level of education, please fill in the part 4.2	If this is your highest level of education, please fill in the part 4.3

4. 1 Upper-Secondary as highest achieved qualification
 (only if you indicated Upper-Secondary as your highest level of education)

4.1.1 General Information About Your Upper-Secondary Education

Period of study: year started – year completed:		
Name of the certificate:		
School, educational institution:		
Place and country:		

4.1.2 Scope and Level

Nominal length of study:		
Have you completed the programme within the normal time?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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?		
Was this education compulsory?	YES <input type="checkbox"/>	NO <input type="checkbox"/>



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-Secondary 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 <input type="checkbox"/>	NO <input type="checkbox"/>
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

Part 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 <input type="checkbox"/>	NO <input type="checkbox"/>
<i>If the answer is YES, please answer the next question</i>	<i>If the answer is NO, please continue to 4.6.</i>

Was job practice a mandatory component of the education?

YES <input type="checkbox"/>	NO <input type="checkbox"/>
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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 component?

YES <input type="checkbox"/>	NO <input type="checkbox"/>
<i>Please answer the questions below if you wrote a thesis or worked with the project</i>	<i>If the answer is NO, please continue to 4.7.</i>

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

1st 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**):

1st 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**):

**2nd 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**):

**2nd 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**):

**3rd 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**):

3rd 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**):

**4th 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**):

4th 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**):

WHERE POSSIBLE PLEASE ATTACH RELEVANT DOCUMENTS
(thesis / research work, bibliographies, 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) :	



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) :	

6. WORK EXPERIENCE

Have you had work experience after you finished your education?

YES

NO

Please answer the questions below if you have had work experience

Period of work, year started – year finished	Employer, country	Position, tasks	In what way could you make use of your education?

Have you had membership in a profession organization?

YES

NO

Please send your CV and copies of documentation of your work experience, if you have it

7. FURTHER EDUCATION

Have you completed any further education /courses?

YES

NO

No.	Period of Study	Institution / Organization	Qualification, 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