

Application form Job Shadowing Programme by Bibliosuisse

Please complete the following form in full and send it to heike.ehrlicher@bibliosuisse.ch by 30 April 2026.

Personal details

Surname, first name	
Library	
Level of employment	
Position	
Entry in the profession (years of experience)	
Professional education	
Email address	
Individual member of Bibliosuisse	

Participation details

Desired field of activity and location (if possible, including your preferred library) for job shadowing:

Motivation

Please describe your motivation for participating in the programme in a maximum of 10 sentences:

Confirmation

With my signature, I confirm the accuracy of my information and express my interest in participating in the job shadowing programme.

Place, date: _____

Signature: _____