

## Application form Job Shadowing Programme by Bibliosuisse

Please complete the following form in full and send it to [heike.ehrlicher@bibliosuisse.ch](mailto:heike.ehrlicher@bibliosuisse.ch) by 31 March 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: \_\_\_\_\_