

Employer-Employee Agreement in accordance with Article 21, para. 2 of Regulation (EC) No. 987/2009

The employee is subject to the social security legislation, and the employer does not have any place of business
in

The employee and the employer hereby agree that the employee shall assume employer's obligations as regards to the
payment of social security contributions and the provision of legally required information.

The employer remains liable for the payment of contributions to social security institutions.

1. Employee

Name

First name(s)

Date of birth Nationality

Address

.....

AHV-AVS No. Telephone

2. Employer

Name of the employer or company

..... École Polytechnique Fédérale de Lausanne (EPFL)

Address BI A1 407 (Batiment BI)

..... Station 7, CH - 1015 Lausanne

Telephone +41 216931111 Fax - E-mail rh@epfl.ch

.....
Date, signature of the employee

.....
Date, signature of the employer

The employee shall send a copy of the present agreement to the institution mentioned in part no. 6 of the certificate A1.