Hint

Application form

**Deadline of the application: 25 April 3013.**

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| **FIRST NAME** |  |
| **SURNAME** |  |
| NATIONALITY |  |
| DATE of BIRTH |  |
| GENDER |  |
| **CONTACT** | ADDRESS  |  |
| TEL. |  |
| E-MAIL |  |
|  **EDUCATION and TRAINING** | Title of qualification awarded  |  |
| Principal subjects/occupational skills covered |  |
| Name and type of organisation providing education and training  |  |
|  |  |
| **NAME OF ORGANISATION** (if you are an active member) |  |
| AREAS OF WORK  |  |
| ADDRESS  |  |
| FUNCTION in ORGANISATION |  |
| **CONTACT PERSON**IN CASE OF EMERGENCY |  |
| ADDRESS |  |
| TEL |  |
| E-MAIL |  |
|  |
| PLEASE DISCRIBE YOUR**EXPERIENCE IN:**(SHORT CHARACTERISTIC) | **Work with children/ youth** |  |
| **International cooperation** |  |
| **Non formal education** |  |
| **Youth in Action Programme** |  |

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| Language skills (self-assessment) | **Understanding**  | Speaking | Writing  |
| European level (\*)  | Listening  | Reading  | Spoken interaction | Spoken production  |  |
| English |  |  |  |  |  |  |  |  |  |  |
| Other: ………………… |  |  |  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| PLEASE DESCRIBE YOUR MOTIVATION TO PARTCICIPATE IN THE TRAINING | Professional expectation  |  |
| Personal expectation (going home again, what should be different in you?) |  |
| How do you plan to use the knowledge and skills you gain during the training in the future youth work |  |

|  |  |  |
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| **SPECIAL NEEDS** | DIETA  |  |
| OTHERS |  |

|  |  |
| --- | --- |
| **NOTES** |  |

Please take in consideration the rules of participation in the seminar:

1. Participants are obliged to provide themselves a travel and health insurance for the whole duration of the training.
2. Participants are obliged to take an active part in pre-seminar preparation – take part in the internet discussion group, prepare presentation about their successful projects when they involved youngsters.
3. Participants are obliged to be present from the first to the last day.
4. 70 % of travel costs will be reimbursed. 20 EUR is a participation fee, that will be taken from the reimbursement of travel costs.

 *The payment may be lowered when requested individually.*

1. Participants agree to share their contact details (particularly e-mail address) with other participants of the training .

Name & surname:

Place:

Date: