

 **Application form for**

 Training Course – “PLUS1**Aid**-Refugees Welcome”

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| **Application form** |
| Surname:  |
| First Name:  |
| Date of Birth: |
| Sex:  |
| Country of residence:  |
| Your current address: |
| Mobile: |
| E-mail:  |
| Name of The Organization:  |
| Your Position in the organization: |
| Web-page of the organization: |
| Contact person from your organization, position of contact person and contact info: |
| Date of arrival in Georgia: |
| Date of Departure from Georgia:  |
| Do you have any medical or other dietary special needs? (if yes, please, provide this information) |
| Please provide brief information about your experience in youth work/NGO work? |
| Explain your main motivation to participate in the project PLUS1**Aid**-Refugees Welcome |
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| Please, describe your previous experience in the theme of the Training Course: |
|  |
| What are your expectations from the project? |
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**Please don’t forget to send an application form till**

**10 February**

**Thank You!**