**ICE2**

**International Cooperation Evolution: Programme + MEDA Countries**

**17 – 23 April 2016**

**Nabeul, Tunisia**

**APPLICATION FORM**

I. Personal details

|  |
| --- |
| **PERSONAL INFORMATION** |
| **Name** |  | Please add your profile picture (like the one on your Identity Card or Passport) here or send it separately attached with the e-mail | **P****H****O****T****O** |
| **Surname****(Family name)** |  |
| **Gender** | male [ ]  | female [ ]  |
| **Birth Date** |  |
| **Nationality** |  |
| **Place of birth** |  |
| **Country of residence** |  |
| **Mobile Phone** (with international code in front) |  |
| **E-mail**  |  |
| **Facebook** (link to your name of Facebook) |  |
| **Emergency Contact** | **Name:** **Telephone:** |  |  |  |
| **OTHER INFORMATION** |
| **What University are you studying at ?****Where do you work?**  |  |
| **Have you participated in any international activity ?** | YES [ ]  | NO [ ]  |
| **Have you participated in a Youth in Action / Erasmus+ Project before ? If YES, where ?**  | YES [ ]  | NO [ ]  |
| **Have you been in TUNISIA before ?** | YES [ ]  | NO [ ]  |
| **Are you vegetarian?** | YES [ ]  | NO [ ]  |
| **Do you have an allergy to milk ?****Or other products made of milk ?****If yes please specify.** | YES [ ]  | NO [ ]  |
| **Do you have any other allergy?****If yes please specify.** | YES [ ]  | NO [ ]  |
| **Do you need special medication ?****If yes please specify.** | YES [ ]  | NO [ ]  |
| **Do you have medical problems/****disabilities ?****If yes please specify.** | YES [ ]  | NO [ ]  |
| **Do you have any special skills that you can share with us (for example: acting, painting)?** **If yes please specify.** | YES [ ]  | NO [ ]  |
| **Do you want to have fun in this project ? ☺** | YES [ ]  | NO [ ]  |
| **If you would like to add anything please write here:** |
| **From where your going to travel ? aeroport !!!****..............................................................................................................................** |

II. Details of organisation

|  |
| --- |
| **EXPLAIN YOUR ROLE IN THE ORGANISATION THAT SENDS YOU:** |
|  |

III. Involvement in youth work

|  |
| --- |
|  **PLEASE DESCRIBE YOUR PREVIOUS EXPERIENCES IN THE FIELD OF (INTERNATIONAL) YOUTH WORK:** |
|  |

IV. Motivation, expectations and needs

|  |
| --- |
| **PLEASE DESCRIBE YOUR OWN PERSONAL MOTIVATION FOR ATTENDING THIS YOUTH EXCHANGE:** |
|  |
| **LANGUAGE ABILITIES** | **WELL** | **ENOUGH** |  **POOR** |  |
| 1. | English |  |  |  |  |  |  | \*write as many languages as you want |
| 2. | ... |  |  |  |  |  |  |
| 3. | ... |  |  |  |  |  |  |

Please, send this application carefully filled **at:**

**asso.eve\_euromed@yahoo.com**

**Project manager: Kais soui / +216 97 492002**