***APPLICATION FORM[[1]](#footnote-1)***

***Training Course “Youth Workers International Networks”***

***02-06.11.2021, Rome, Italy***

Please complete this form in English. The information presented in this form will help the facilitators’ team and hosting staff understand more about your motivation and expectations.

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| **PERSONAL DETAILS** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name and current address of the participant | | | | | | | |
| Family name | |  | | First name |  | | |
| Street address | |  | | | | | |
| Postcode | |  | | City |  | | |
| Country |  | |
| Telephone | |  | | Email |  | | |
|  | | | | | | | |
| Personal details | | | | | | | |
| Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | | Gender | female | male | other |
|  | | | | | | | |
| Emergency contact | | | | | | | |
| Please provide contact details of a person who can be contacted in case of an emergency. | | | | | | | |
| Family name *(Mr/Ms)* | |  | | First name |  | | |
| Street address | |  | | | | | |
| Telephone | |  | |  |  | | |

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| **Facebook contact[[2]](#footnote-2)** |
| Link: |

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| **EXPERIENCE & MOTIVATION** |

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| Previous experience |
| Have you ever participated in any project under Erasmus+ , and/or organized a project witin these programmes or of similar type?  Please describe your experience in the field? (limit: 2000 characters) |
|  |

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| Motivation |
| Why would you like to participate in this training course? (limit: 2000 characters) |
|  |

**Please return this application form to your sending organization on:** [**contact@pel.mk**](mailto:contact@pel.mk)

1. All the personal information provided will be used for the purpose of selection and during the implementation of project activities exclusively. By providing the necessary information, you give your consent to their usage according to GDPR. [↑](#footnote-ref-1)
2. This link will be used to add the participant into the project’s Facebook group. [↑](#footnote-ref-2)