



YOUTHPASS – TOOLS & METHODS"

Berlin. 22 – 28 November

APPLICATION FORM

Please write in English

Participant name: Mr/Ms/Mrs.....

Sex: Female Male

Date of birth:

Nationality:

Home address:

Phone:

Mobile phone:

E-mail:

Organisation's name:

Organisation's address:

Phone:

Fax:..... E-mail..... Web site:

Type of organisation:

- Type organisation or association group
- Status governmental/public non-governmental other
- Activity level local regional national international
- European level non-governmental organisation
(with member organisations in at least 8 Programme countries)

Activities of the organisation:

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Your function in the organisation:

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Organisation's experience in Youth in action programme

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Organisation's experience in Youthpass

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What are your aims in this training, what do you expect?

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.....
The working language of the training course is English. Please, state your level of knowledge:

	Fluent	Reasonable	Poor
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What other languages do you speak?:

	Fluent	Reasonable	Poor
Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
German	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other languages:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Special requests (Visa, Diet, Vegetarian, Health, Disabilities, etc.):

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DECLARATION Please take note of the following conditions, which will apply, if you accept a place on the training course.

- I commit myself to attending the whole duration of the training course.
- My data and information about my organisation and work can be shared with the other participants as part of the course material and for other issues related to non-formal youth work.
- I authorise SOHO to use my data anonymously for statistical reasons and to publish photos of the course for dissemination purposes.
- Obtaining a full travel insurance policy is the participant's responsibility.
- I understand that providing the above information about special needs does not remove my own personal responsibility for ensuring my own safety.

Please apply online for this course via the link at <http://www.salto-youth.net/tools/training/find-a-training/1836.html> and return this application form **at the latest by 10 September** to the Youth Department in your Autonomous Community; Andalusian Applicants must send it to:

jeaccion4.iaj@juntadeandalucia.es

For further information, please contact: Ingrid Müller : mueller@jfemail.de