**Key Action 1: Learning Mobility of Individuals**

**“Thousand ways to eat” PROJECT**

**13 – 21 JULY 2015,**

**MUGA DE SAYAGO/SPAIN**

**APPLICATION FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | | | | | | | | | | | | | |
| ***Name*** |  | | | | | | | | | ***Surname*** | | |  | | |
| ***Gender*** | ***Female*** | |  | | ***Male*** |  | | ***Date of birth*** | | | |  | | | ***PHOTO*** |
| ***Place of birth*** | ***City*** |  | | | | ***Country*** | | | | |  | | | |  |
| ***Home address*** |  | | | | | | | | | | | | | |
| ***Nationality*** |  | | | | | | ***Residence country*** | | | | | | |  |
| **Identity docs.**  **Very Importand !!!** | ***Passport no*** | | |  | | | | | | | | | | |
| ***Id number*** | | |  | | | | | ***Other ID*** | | |  | | |
| ***e-mail*** |  | | | | | | | | | | | | | |
| ***Phone*** |  | | | | | | | | | | | | | |
| ***Emergency Contacts*** *(Please give us 2)* | | | | | | | | | | | | | | | |
| ***Contact 1*** *(name, address, phone and relationship)* | |  | | | | | | | | | | | | | |
| ***Contact 2*** *(name, address, phone and relationship)* | |  | | | | | | | | | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **OTHER INFORMATION** | | | | | |
| ***Mark your t-shirt size*** | |  | | | |
| ***Do you need a VISA to come to Spain?*** | | | |  |  |
| ***Do you need an Invitation letter from us ?*** | | | |  |  |
| ***Do you have a valid passport?*** | | | |  |  |
| ***Is available 6 more months from now on?*** | | | |  |  |
| ***Do you want a YouthPass certificate for this project?*** | | | |  |  |
| ***Have you participated in any international activity ?*** | | | |  |  |
| ***Have you participated in any EUYouthProgramme Project?*** | | | |  |  |
| ***Have you participated in a Youth in Action Project before?*** | | | |  |  |
| ***If yes, Where?*** |  | | | | |
| ***Do you smoke?*** | | | |  |  |
| ***Do you have any special skills (acting, painting, writing)?*** | | | |  |  |
| ***If yes, tell us which one:*** | | |  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Are you studying/Did you study at the university?*** | | |  |  |
| ***If yes, indicate in wich one and what did you/are you study/ing:*** | |  | | |
| ***Do you have medical problems or disabilities ?*** | | |  |  |
| ***If yes, specify:*** |  | | | |
| ***Do you need special medication?*** | | |  |  |
| ***If yes, specify:*** |  | | | |
| ***Do you have any allergy?*** | | |  |  |
| ***If yes, tell us which one:*** |  | | | |
| ***Are you lactose intolerant?*** | | |  |  |
| ***Are you vegetarian?*** | | |  |  |
| ***Do you eat pork?*** | | |  |  |
| ***Do you want to have fun in this project?*** | | |  |  |
| ***If you would like to add anything please write here:*** | |  | | |
| ***How did you find out about this project and about us ?*** | |  | | |

|  |  |
| --- | --- |
| **DETAILS OF YOUR ORGANISATION** | |
| ***Explain your role in the NGO*** |  |

|  |  |
| --- | --- |
| **INVOLVEMENT IN YOUTH WORK** | |
| ***Please describe your previous experiences about international youth work*** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **LANGUAGE SKILLS** | | | | | | | |
| ***Specify wich languages you know and note if the level is B:Basic ; G: Good; F: Fluent.*** | | | | | | | |
| ***Language 1*** |  | ***Speaking*** |  | ***Writing*** |  | ***Understanding*** |  |
| ***Language 2*** |  | ***Speaking*** |  | ***Writing*** |  | ***Understanding*** |  |
| ***Language 3*** |  | ***Speaking*** |  | ***Writing*** |  | ***Understanding*** |  |
| ***Language 4*** |  | ***Speaking*** |  | ***Writing*** |  | ***Understanding*** |  |

|  |  |
| --- | --- |
| **MOTIVATION, EXPECTATIONS AND NEEDS** | |
| ***Please describe your own personal motivation for attending this youth exchange project*** |  |

|  |  |
| --- | --- |
| **TRAVEL DETAILS** | |
| ***From which country/city are you coming?*** |  |
| ***Please describe your full itinerary, note the different transportation*** |  |
| ***How much your round trip transportation will cost? (please note 100%)*** |  |

**Please, send this application form carefully filled and saved as a PDF document   
 until 2*5th MAY 2015***

info@involved.ee

**THANKS!!!**