**Personal Data**

Surname: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Forename(s): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Age: **\_\_\_\_\_\_\_\_** Date of birth: **\_\_\_\_\_** / **\_\_\_\_\_\_** / **\_\_\_\_\_\_\_\_\_\_**

(Day) (Month) (Year)

Sex: male  female 

Place of birth: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Nationality: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Marital status: single  married  widow  widower  partnered 

Child/ren: none  1  2  3  4  more 

Home address

Street: Postal code:

Town: Country:

Mobile phone\*: E-mail:

\* (with international dialling codes + prefixes)

**Health condition and Special needs**

Medical

Do you have a medical condition that we should be aware of? Thank you for not withholding any information that is essential for us, example: severe backaches that prevent you from lifting people.

Do you have to take any special medication? (This is to help with placing you, not to disqualify you in any way.)

Do you have any specific dietary needs (allergy, vegetarian,…)?

Do you have any other special needs that we should be aware of? Do you have any disabilities (mental/physical)? If yes, please specify your diagnosis and symptoms.

Remarks:

**Attitude, expectation and motivation**

I’m applying for 12 months: 🞏 from January 2019 🞏 from April 2019

Do you have any experience in voluntary work (practical training, holiday jobs)?

What type of voluntary work (social work, youth work, organisational work, church work, etc.)?

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Why do you want to do your volunteering project in EUFEMIA? What do you expect to get out of it?

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Why do you think you would be a good candidate for this Volunteering Project in EUFEMIA? (please describe how you think you can contribute to the organization, the projects and the team)

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Why did you choose an EVS experience in Italy?

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What do you think you’ll find hard about doing a voluntary service?

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**More about you?**

Personal summary

Please write a short paragraph about yourself (personal / practical skills and competences, character, strong and weak points, etc…. )

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Which event in your life seems to be the most important to you? Why?

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Do you have any hobbies (sports, music, dance etc.) ?

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What do your family members and friends think about your doing a voluntary service?

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Insert a photo / image that represents you:

Have you ever heard about Erasmus+ and EVS projects?

**Experience and questions about the project**

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Have you ever participated in an Erasmus + project? If so, please, describe the experience

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How did you find out about this project?

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If on the internet, which web sites pointed you to us? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

How certain are you that you are willing to do a voluntary service with us?

 I’m very certain.  I’m not sure, yet.

If you are not sure, why not ? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Have you applied for voluntary service with other organisations as well?

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Where would you be wanting to live?  in the countryside  in a town  in a bigger city (capital)

### References

Name: Relation:

Address:

Phone: E-mail:

Name: Relation:

Address:

Phone: E-mail:

### Anything else you want us to know?

Space for further information / comments

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### Signature

I understand that the duration of my Volunteering Project in Italy will be of 12 months. I have filled in the application myself. I agree that my personal information (address, health status, etc.) may be handed on to the partner organisations and placements. The Eufemia’s partners declare that all information given in this form will be used according to the national laws on privacy for activities related to the application and to make proposals as requested.

Place, date Signature