APPENDIX

**Application form/Expression of interest**

|  |
| --- |
| **Personal detaIls** |
| First name |  |
| Last name |  |
| Date of birth (dd/mm/yyyy) |  | Nationality |  | Gender (M/F) |  |
| Permanent address |  |
|  | Postal code |  |
|  | Town |  | Country |  |
| Place of work |  |
| Address of the employer |  |
| Email |  |
| Telephone (with country and city codes!) |  |
| Mobile  |  |
| Emergency contact details |  |

|  |
| --- |
| **DETAILS OF THE NOMINATING ORGANISATION** |
| Name of organisation |  |
| Postal address |  |
|  | Zip code |  |
|  | City |  | Country |  |
| Email address |  |
| Telephone |  |
| Fax |  |
| Brief info about your organisation (field of work, activities etc.)What are your **role** and tasks within your organisation?  |

|  |
| --- |
|  Do you have any **special needs or requirements** that the hosting organisation should know about? (E.g. mobility, medical needs, allergies, dietary restrictions) |

|  |
| --- |
| **DEADLINE – SUNDAY 4 october 2020 MIDNIGHT CET****All applications should be sent to** youthmobility@coe.int |