



1st AoC SUMMER SCHOOL

University of Aveiro, 15-22 August 2010

APPLICATION FORM for Participants

Please type or write legibly. If necessary, please attach an extra sheet.

I. INFORMATION ABOUT THE APPLICANT

1. Name:

Sex: Male Female Age: Nationality:

2. Working languages:

English French Others (Please specify all the languages you are able to work in):

3. Contacts – Please note that all correspondence will be sent to this address, so please ensure it is complete.

Postal address (street, number, city, postal code, country):

Telephone: Telefax:

Mobile telephone: E-mail:

II. INFORMATION ABOUT THE ORGANISATION

4. Sending organisation or institution

Name:

Postal address:

Telephone: Telefax:

E-mail: Internet address:

5. How would you best describe your sending organisation? (multiple answers possible)

- an international youth organization a national youth council (name):
- a school/university a local/regional youth organization
- a national youth organization a student association/organization
- a development NGO a governmental institution
- a minority or minority rights association
- other (please specify):

6. What is your role/responsibility within your organization?

- volunteer employee board member (elected)
- active member civil servant student

other (please specify):

7. In what capacity are you involved in youth work or non-formal education?

- full-time youth worker
- volunteer youth worker
- teacher
- leader/member of a student association
- other (please specify)

- trainer of youth workers or youth leaders
- occasional youth worker
- leader of a youth group

8. Why does your organisation want to take part in this course? Add extra sheet if necessary

9. What is your organisation’s interest in the UN Alliance of Civilizations ?

10. Please describe briefly the future plans of your organization as regard the promotion of the Alliance of Civilizations’ goals i.e. intercultural dialogue and cooperation in the field of youth, education, media and migration aimed at building bridges between peoples, cultures and religions (add an extra sheet if necessary)

11. Please describe your role and position in your organisation.

12. What is your personal motivation to participate in the event? (add extra sheet if necessary)

<p>13. Please describe the project you would like to develop as a follow up to the AoC Summer Course. Please complete ANNEX attached. Add an extra sheet if necessary</p>	
<p>14. Have you any special needs or requirements? (e.g. dietary, disability, etc.)</p>	
<p>15. Visas</p> <p>If you are accepted as a participant on this course, will you require assistance in obtaining a Visa for Portugal?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, please indicate:</p> <p>Date of birth: Passport No.: Issued at (place and date):</p> <p>Place of birth: Date of expiry:</p>	
<p>16. Plane ticket, from airport of departure to Lisbon airport</p> <p>Price of your ticket: Euros</p> <p>Departure (city): Date:</p> <p>Return (city):Date:</p>	
<p>17. Do you need any financial support to attend the AoC Summer course ?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, please indicate:</p> <p>Support for travel expenses ? <input type="checkbox"/> Yes</p> <p>Support for the course fee ? <input type="checkbox"/> Yes</p>	
<p>18. Course Fee – The course will have a participation fee of 250 euros covering accommodation, tuition and visits included in the Program.</p>	

Date:

Signature:

Send before the 27th July 2010

Send to Ms Aurélia Martins - aureliamartins@netcabo.pt

An initiative in cooperation with:



AKDN

AGA KHAN DEVELOPMENT NETWORK



COMISSÃO EUROPEIA
Representação em Portugal





ANNEX - Alliance of Civilizations' 1st SUMMER SCHOOL – DRAFT PROJECTS

2010 Form (add extra sheet if necessary)

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ACTIVITY TITLE	
LEADING <i>ORGANIZATION</i> <i>and/or</i> <i>Project Coordinator</i> <i>(name and location)</i>	
DESCRIPTION OF ACTIVITY	
ACTIVITY FORMAT and WORKING METHODS	
PARTICIPANTS AND PARTNERS	

EXPECTED RESULTS	
COMMITMENTS	
BUDGET <i>(specify any possible support)</i>	
AOB	
SECRETARIAT CONTACT	
DOCUMENTS AND LINKS	