ERASMUS +

## GO NATURAL: ADD QUALITY TO YOUR LIFE!

A STUDY VISIT ORGANIZED IN THE CONTEXT OF THE ERASMUS+ PROGRAMME

Tirana, Albania 3-10 July 2022

## **APPLICATION FORM**

## PERSONAL DETAILS OF PARTICIPANTS

Name:	Family name:			
Country:	City/municipality:	City/municipality:		
Email:	Phone number:			
Date of birth:				
English proficiency: elementary limited working	professional	native		
IN CASE OF EMERGENCY				
Name:	Family Name:			
Email:	Phone number:			
What is their role and/or relation to you:				
INFORMATION ABOUT ORGANISATION				
Name of the organisation:				
Address:				
Email:	Phone number:			
Your position in the organisation:				
Aims of the organization:				
PROJECT				
Are you applying to participate in this Study Visit as a: Youth worker (responsible for management or delivery of pro				
Youth leader (age 18-25)				
Other:				
2 Introduce yourself briefly.				

3	Can the organizers use images (pictures & videos) from the Study Visit in which you will participate (for publications,
	website,) ?
	Yes No
4	Do you have any food requirements (vegetarian, allergies etc.)?
5	Do you have any other special needs (mobility, medical, religious etc.)?
6	Your travel details:
have of t	program starts on the 3-d of July and finishes on 10-th of July. Before booking please inform us of the possible flights and only book after we confirmed. Please give us your mode of transport and arrival time in Tirana. Note that if you want to stay more days there is a maximum wo days (before or after) and those days are not covered in terms of food and accommodation. Concerning the actual situation there is no riction to enter Albania, check up on return, the necessary measure will be taken in order to be safe.  What is your motivation to participate in the project?
8	What do you hope to gain from it?

• Have you taken part in any international youth work project before (Study Visit, Training Course, You If yes, which one(s)?		
	vill you do after the Study Visit in Albania? Do you plan to organize any activity after the project? be the target group? Please explain	
AGREEMEN'	TS	
	rmation in this application is correct and that I will inform the organizer of any change in my application/participation immediately.	
	ponsible for my own travel documents and health insurance, and that by providing the above information on special needs I am own health and safety.	
If I do not participat	te in the full duration of the Study Visit, I will lose my right to travel reimbursement from the project organizers.	
Yes	No	
Thank you! We w	ill be in contact soon with more information.	
	in so in contact soon with more information.	
Signature of app		
Signature of app		

# @ & C

