**APPLICATION**



**EUROPEAN SOLIDARITY CORPS**

**VOLUNTEER PROGRAMME**

**VOLUNTEER**

**FOTO**

**HERE**

**PERSONNAL DETAILS**

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| **PERSONAL DETAILS** | | | | | | | | | |
| **NAME** |  | | | | **SURNAME** | |  | | |
| **STREET** |  | | | | **NUMBER** | |  | | |
| **POSTAL CODE** |  | | **CITY** |  | | | **COUNTRY** | |  |
| **DATE OF BIRTH** |  | | | **IDENTIFICATION NUMBER** | |  | | | |
| **NATIONALITY** |  | | | **GENDER** | |  | | | |
| **PHONE NUMBER** | **MOBILE** | **+** | | | | **WHATSAPP** | | **YES NO** | |
| **HOME** | **+** | | | | | | | |
| **EMAIL** |  | | | | | | | | |
| **ESC ENROLMENT Nº** |  | | | | | | | | |

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| **EMERGENCY CONTACT IN YOUR HOME COUNTRY** | | | | | | | | | | |
| **NAME** |  | | | | | **SURNAME** | |  | | |
| **STREET** |  | | | | | **NUMBER** | |  | | |
| **POSTAL CODE** |  | | **CITY** |  | | | | **COUNTRY** | |  |
| **PHONE NUMBER** | **MOBILE** | **+** | | | | | **WHATSAPP** | | **YES NO** | |
| **HOME** | **+** | | | | | | | | |
| **EMAIL** |  | | | | | | | | | |
| **RELATIONSHIP TO THE PERSON NAMED** | | | | |  | | | | | |

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| **WHAT IS YOUR EDUCATIONAL BACKGROUND?** |
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| **WHAT ARE YOU CURRENTLY DOING?** |
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| **WHAT RELEVANT EXPERIENCE/KNOWLEDGE DO YOU HAVE AND THINK YOU COULD SHARE DURING THIS VOLUNTEERING EXPERIENCE (EXPERIENCE IN THE FIELD, SPORTS, ARTS, ETC…)?** |
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| **WHAT ARE YOUR STRENGTHS AND WEAKNESSES? WHAT VALUES ARE MOST IMPORTANT TO YOU?** |
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| **DO YOU HAVE ANY SPECIAL NEEDS THAT WOULD NEED TO BE TAKEN INTO ACCOUNT?**  **(E.G. ALLERGIES, DIETARY NEEDS, PROBLEMS OF MOBILITY, HEALTH CARE, PHYSICAL DISABILITY, PSYCHOLOGICAL PROBLEMS, ETC…) THIS INFORMATION WILL REMAIN ABSOLUTELY CONFIDENTIAL.** |
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| **THIS PROJECT REQUIRES YOU TO LIVE IN A TOWN (NOT CITY). PLEASE SHARE WITH US YOUR REFLECTIONS ON HOW DO YOU SEE YOURSELF ADAPTING TO THE EVERYDAY LIFE IN A SPANISH TOWN AS IT IS REQUENA?** |
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| **WHAT WOULD YOU LIKE TO GAIN FROM VOLUNTEERING IN THIS PROJECT?**  **WHAT WILL THE PROJECT GET FROM SELECTING YOU AS THEIR VOLUNTEER?** |
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| **MOTIVATION** |
| ***IT IS IMPORTANT FOR US TO KNOW THE REASON FOR YOUR DECISION TO VOLUNTEER, BUT EVEN MORE IMPORTANT IF POSSIBLE, AFTER KNOWING THE SPECIAL PROFILE OF THE TARGET GROUP WITH WHICH YOU WOULD CARRY OUT YOUR DAILY ACTIVITIES, WHAT IS YOUR MOTIVATION TO CARRY OUT A SOCIAL VOLUNTEERING WITH PEOPLE WITH FUNCTIONAL DIVERSITY?***  ***WE DO NOT EXPECT ANY EXPERIENCE IN THE FIELD BUT A GREAT MOTIVATION, SINCERE INTEREST AND UNDERSTANDING AND MOST OF ALL A POSITIVE IMPACT.*** |
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| **HOSTING PROJECTS** | |
| ***PLEASE NUMBER ACCORDING YOUR PREFERENCE (1,2, ETC...) THE PROJECTS YOU WANT TO SUBMIT YOUR APPLICATION FOR.*** | |
|  | **COM REQUENA (REQUENA)** |
|  | **CO MARÍA RAFOLS (UTIEL)** |

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| **SENDING ORGANISATION DETAILS (IF APPLICABLE)** | | | | | | |
| **NAME** |  | | | | | |
| **STREET** |  | | | **NUMBER** |  | |
| **POSTAL CODE** |  | **CITY** |  | | **COUNTRY** |  |
| **PHONE NUMBER** | **+** | | | | | |
| **EMAIL** |  | | | | | |
| **SENDING ORGANISATION CONTACT PERSON DETAILS** | | | | | | |
| **NAME** |  | | | **SURNAME** |  | |
| **STREET** |  | | | **NUMBER** |  | |
| **POSTAL CODE** |  | **CITY** |  | | **COUNTRY** |  |
| **PHONE NUMBER** | **+** | | | | | |
| **MAIL** |  | | | | | |