

PARTICIPATION FORM

TC “Digital Literacy On Human Rights Education”
Metropolitan area Chieti-Pescara – November 26th – December 03rd 2015

PERSONAL INFORMATIONS

FIRST NAME		SURNAME		GENDER	
DATE OF BIRTH		PLACE OF BIRTH		NATIONALITY	
ADDRESS			TOWN		CAP
E-MAIL			PHONE		
FACEBOOK			SKYPE ID		
ROLE	If applicable, please describe your role and the tasks you cover within your NGO.				
DESCRIPTION	Diploma, qualifications, hobbies, more informations about you.				
MOTIVATION	Reasons to participate in this project.				
EXPERIENCE IN THE TOPIC	What is your experience linked to this topic? What are the main online platforms that you use to be informed?				
EXPERIENCE IN EDUCATIONAL MOBILITY	Please list the number and type of Youth in Action/Erasmus Plus projects attended so far				
CONTRIBUTION	How can you contribute to the dissemination and follow up of this project?				
NEEDS	Allergies, gluten free, vegetarian, vegan menù, devices or medicines you need				

ENGLISH PROFICIENCY

Identities

VAT: 93051740699

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	Understanding		Speaking		Writing
	Listening	Reading	Spoken interaction	Spoken production	
English					
Mothertongue					
Levels: A1/2: Basic user - B1/2: Independent user - C1/2 Proficient user Common European Framework of Reference for Languages					

TRAVEL PLAN

DOCUMENT	TYPE	EXPIRY DATE
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DEPARTURE

	CITY	DATE	TIME
FROM			
STOPOVER			
TO			

RETURN

	CITY	DATE	TIME
FROM			
STOPOVER			
TO			

TICKET PRICE: € + bus/train ticket

EMERGENCY CONTACT	
PHONE	E-MAIL

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