

Application Form

Please read **carefully** and fill out this form **completely**!
 Your application will not be considered if any detail is missing!
 Please send the signed form by fax or mail by **7th August (for people in need of visa)** and
28th August 2011 (for those without visa requirement)

A. Hereby, I apply for the *Practitioner Training(s)*

- Project Management for Peace Work - Planning, Monitoring & Evaluating**
 Date: 19 – 23 September 2011
- Gender-sensitive Planning in Conflict Transformation and Peacebuilding**
 Date: 26 - 30 September 2011
- Security Management for Peace Work in Conflict Zones**
 Date: 03 - 07 October 2011
- Counselling in Trauma and Stress for Peace Work in Conflict Zones**
 Date: 10 – 14 October 2011
- Managing Organisational Change in Non-Governmental Organisations**
 Date: 24 - 28 October 2011

B. Personal Data (as stated in your passport)

Surname(s): _____

First Name(s): _____

Physical Address (no P.O.Box): _____

Postal Address (if differing): _____

Date of birth (m/d/y): _____

Place of Birth: _____

Gender: _____

Education: _____

Profession: _____

Nationality: _____

Relevant for visa application!

Passport Number: _____

Date of Issue: _____

Place of Issue: _____

Date of Expiry: _____

Have you been in Europe
before (where & how often)? _____

C. Ability to speak and comprehend English language (Self-Assessment)

strong

sufficient

weak

D. Special Needs / Important Information

E. References

Please name two people who could serve as references for you. These should be superiors or colleagues who know you well and are familiar with your work.

Reference 1		Reference 2	
Name:	_____	Name:	_____
Function:	_____	Function:	_____
Address:	_____	Address:	_____
	_____		_____
Telephone:	_____	Telephone:	_____
Fax:	_____	Fax:	_____
Email:	_____	Email:	_____

F. Terms and Conditions

For retirement from the participation after registration later than 10 days before the training starts cancellation charge is 50 per cent of the training fee. For non-attendance without cancellation or cancellation later than 3 days before the training starts we charge 100 per cent of the training fee.

Upon receiving this form, please fill-in and send back as soon as possible and please transfer the payable amount to the given account on the bottom of this sheet stating the course title and your name):

G. Declaration (Please tick the boxes which are applicable.)

- I commit to attend the whole training(s) and agree to the terms and conditions (see above).
- I am fully aware of the expenses related to the participation in the training and will be able to cover the full participation fee and my travel expenses. (participation fee for each training is 850.-€)
- I am fully aware of the expenses related to the participation in the training and will be able to cover the reduced participation fee and my travel expenses. (reduced participation fee for each training is 650.-€)
- I am fully aware of the expenses related to the participation in the training but request financial assistance as explained below.

Place, date: _____ Signature: _____

H. Request for Financial Assistance (if needed)

Please be aware that we can provide only limited financial assistance, which depends on funds from donors.

I request financial assistance by KURVE Wustrow. Please tick the box, which indicates the requested scheme for financial assistance:

- I will be able to cover the full participation fee (each Euro 850,-) but need a subsidy for my travel expenses.
The maximum subsidy I need is _____ Euro.
- I will be able to cover the reduced participation fee (each Euro 650,-) but need a subsidy for my travel expenses.
The maximum subsidy I need is _____ Euro.
- I will not be able to cover a participation fee and my travel expenses.
The maximum subsidy I need is _____ Euro.

Please explain briefly but clearly why you need financial assistance by KURVE Wustrow.

I. Essay Questions (Please answer these questions and use extra paper if needed)

1. Please describe the organisation/initiative you are working for, and the specific work that you are doing within this organisation/initiative.

2. Please explain your motivation for wanting to attend this/these specific training(s).

3. Please explain what you expect to learn in this/these specific training(s).

4. Please describe what are your relevant experiences, and how you could contribute to the learning in the training(s).

5. Please relate how you intend to apply what you will have learned at this/these training(s) to your work and life.

Please send a scanned copy of this form to: training@kurviewustrow.org
or as a fax to: +495843987122