Sending/supporting organisation

Name of organisation: _____

Address: _____

E-mail: _____ Phone: _____

Contact person: _____ OID: _____

Curriculum Vitae

Contact Information

Surname: _____

First name(s): _____

Address: _____

Postcode & city: _____

Country: _____

Phone: _____

E-mail: _____

PRN* _____

Click here to add your photo

*To find your (Participant Reference Number) PRN, you first need to register with the European Solidarity Corps. After registering, go to the home dashboard of the portal to find your PRN.

Personal information

Gender: _____ Nationality: _____

Date of birth: _____ Place of birth: _____

Education: _____

Person to contact in case of emergency (Name, Address, Telephone and E-mail)

Do you have any former work and/or volunteer experiences? (Please describe)

Do you have any leisure time activities or hobbies? (Please describe)

Do you have any former international experiences (other stays abroad, exchanges etc.)? (Please describe)

How would you describe your personality?

Do you have any special needs (medical conditions, handicaps etc.)?	Yes ◯	No ◯
Do you have any kind of allergy?	Yes ◯	No ◯
Do you need to take any kind of medicine?	Yes ◯	No ◯
Are you vegetarian/vegan?	Yes ◯	No ◯
Is there any food you do not eat?	Yes ◯	No ◯

Please give further description if you have answered yes to any of the above questions

The European Solidarity Corps aims to promote social inclusion by facilitating access to all opportunities for young people with fewer opportunities. This includes disabilities, health problems, educational difficulties, cultural differences, economic/social/geographical obstacles, young people from marginalised communities or at risk of facing discrimination.

Are you included in one of these categories? If so, please explain

Do you like animals/domestic pets? Yes ◯ No ◯

Do you smoke? Yes ◯ No ◯

Can you accept living with a host family? Yes ◯ No ◯

Do you hold a driver's licence? Yes ◯ No ◯

What are your plans after ESC?

Language abilities

Language (mark by x)	Native	Fluent	Good	Basic
Danish	◯	◯	◯	◯
English	◯	◯	◯	◯
	◯	◯	◯	◯
	◯	◯	◯	◯
	◯	◯	◯	◯

Your motivation – Which project interests you?

Name of the host project: _____

When can you start and for how long: _____

Please describe below carefully your motivation for this specific project

DATA PRIVACY DISCLAIMER

I agree that ICYE may collect, use and share my personal data as well as the data provided for third parties mentioned in this form (your emergency contact), with the following programme stakeholders: hosting organisation, host family, host placement, insurance company, the National Agency in Denmark, and the ICYE International Office.
In accordance with our data protection policy [available at http://www.icye.org/data-privacy/], your personal data will be securely stored and be kept indefinitely for statistical, bookkeeping and transparency reasons, but by no means for commercial or promotional purposes. If you do not want your data to be stored, please contact your sending organization.
If you would like your data to be deleted at the end of your contract/volunteering period, or at a later date, please inform/contact your sending organisation.
We may need to keep some documents for a longer time, due to bookkeeping laws.

Please tick one of the following boxes: ☐ ***I consent*** ☐ ***I do not consent***

Date and Signature of Candidate _____

If selected to participate in the volunteering programme, I also agree that ICYE may collect and use my photos and articles on the website, on social media, in newsletters, etc. for promotional purposes.

Please tick one of the following boxes: ☐ ***I consent*** ☐ ***I do not consent***

Date and Signature of Candidate _____