.

*We will inform you as soon as we have received the selection results of the host organisation.*

### Supporting organisation details

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | ProAtlântico-Associação Juvenil  | OID: | E10120334 |
| Address: | Casa Europa-Rua Policarpo Anjos nº 43,1495-207 Cruz Quebrada, Portugal |
| Phone: | 00351214218417 | E-mail: sveenvio@proatlantico.com  |  |
| Contact person: | Nuno Chaves |

### Contact Information

|  |  |  |  |
| --- | --- | --- | --- |
| Surname(s): |  |  | (Photo) |
| First name(s): |  |  |
| Address: |  |  |
| Postcode & city: |  |  |
| Country: |  |  |
| Phone: |  |  |
| Email: |  |

### Personal information

|  |  |  |  |
| --- | --- | --- | --- |
| Gender: |  | Nationality: |  |
| Date of birth: |  | Place of birth: |  |
| PRN (your registration number at the online portal): |  |
| Passport number:  |  |

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

|  |
| --- |
|  please tick here to show you understand and accept the above declaration.  |
|  |

#### Your current occupation

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| --- |
|  |

#### Please describe your previous work and/or volunteer experiences (local and international)?

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

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| --- |
|  |

#### What are your hobbies?

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| --- |
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#### How would you describe your personality?

|  |
| --- |
|  |

#### Knowledge and skills you can share during your volunteering experience:

|  |
| --- |
|  |

#### Knowledge and skills you hope to gain during your volunteering experience:

|  |
| --- |
|  |

#### Which challenges do you think you will encounter during your stay abroad?

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| --- |
|  |

#### Do you consider that in your life you face some of the following obstacles?

|  |  |  |
| --- | --- | --- |
| Please answer honestly. This information will help us in the selection and preparation process and will ensure you are offered adequate support during your volunteering activity. | Yes | No |
| Disability / special needs – *e.g. mental (intellectual, cognitive, learning), physical, sensory or other disabilities* |  |  |
| Health problems - *e.g. chronic health problems, severe illnesses or psychiatric conditions* |  |  |
| Educational difficulties - *e.g. learning difficulties, early school-leaver, poor school performance* |  |  |
| Cultural differences - *e.g. immigrant, refugees or with immigrant or refugee family background, belonging to a national or ethnic minority* |  |  |
| Economic obstacles - *e.g. low standard of living, low income, dependence on social welfare system, long-term unemployment or poverty, debt or financial problems* |  |  |
| Social obstacles - *e.g. facing discrimination because of gender, ethnicity, religion, sexual orientation* |  |  |
| Geographical obstacles - *e.g. from remote or rural areas, young people living on small islands or in peripheral regions, young people from urban problem zones, young people from less serviced areas (limited public transport, poor facilities)* |  |  |

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Do you have any special needs (medical conditions, disabilities, impairments etc.)? |  |  |
| Do you have any kind of allergy?  |  |  |
| Do you need to take any kind of medicine? |  |  |
| Are you a vegetarian?  |  |  |
| Is there any food you do not eat? |  |  |

#### If you have answered yes to any of the above questions, please give further description and if applicable describe the necessary assistance/support you will need when living in Lower Austria.

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| --- |
|  |

### Language abilities

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Language (mark by x) |  | Native | Fluent | Good | Basic |
| German |  |  |  |  |  |
| English |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Declaration

‘I agree that the data in this form will be shared with the responsible in the coordinating and hosting organisation’

 please tick here to show you understand and accept the above declaration.

### Your motivation – Which organisation are you interested in?

Please describe below carefully your motivation for this specific project or attach a motivation letter

|  |
| --- |
|  |

#### Is there anything else you would like to tell?

|  |
| --- |
|  |

Declaration

“I declare that all of the information on this application form is honest and truthful to ability, experience and support needs and has been completed by the volunteer named on this application form. Furthermore, I declare that I have never taken part in any long term Erasmus+ or ESC funded volunteering project. “

 please tick here to show you understand and accept the above declaration.

Thank you for filling in the application form!