

**Application for ESC11** **Project: in Valga youth centre, Tõrva youth centre, Taheva youth centre, Karula youth centre, Tõlliste youth centre, Lusti kindergarten and Hargla school kindregarten + Gaia class.**

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| PHOTO OF YOU IN HERE :) |

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| Family name | (Mr/Ms) |  | First name |  |
| Date of birth | dd/mm/yy |  | Gender |  |
| Street address |  |
|  |  | City |  |
| Region |  | Country |  |
| Email |  |
| Home phone nr. |  | Mobile nr. |  |
| Place of birth***Facebook or Instagram account link:*** |  | Nationaliy |   |

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| Background information |
| What is your current situation (studying, working, unemployed)? |
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| Your education. Where, what and for how long did you study? |
|  |
| Work experience. Where did you work and what did you do? |
| What languages do you speak? |
| Language | Basic | Good | Fluent |
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| Please describe yourself including strengths and weaknesses |
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|  Do you prefer youth centre or kindergarten – make a “X” for preferences  (You may choose also both)  |
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|  | Youth centre |  | Kindregarten |

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| ***Choose FIVE things you would prefer/like – make a “X” for preferences*** |
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|  | skatehall |  | active community |
|  | cooking |  | activities related with nature |
|  | rural area |  | photography |
|  | Estonian Defence League activities |  | crafting/handwork |
|  | robotics |  | event organizer |
|  | nature |  | sport activities |
|  | workshop leader |  | Board games |
|  | parkour trainings |  | mechanics |
|  | music/ band |  | multi-cultural |

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| Motivation |
| Why would you like to take part at the European Voluntary Programme (in general)? |
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| Did you ever do any youth work or voluntary services? What did you do? |
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| Why did you choose this project? What do you expect from the project? |
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| What are your hobbies? Are there things you are extremely good in? |
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| How do you see yourself on the project you are applying for? What exactly can you contribute? How the project can benefit for choosing you? |
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| Describe your experience, knowledges and skills which could help you in your ESC. |
|   |
| What goals do you want to reach during your voluntary service?  |
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| What challenges and difficulties do you think you encounter during a long time living in another culture with a different set of values? |
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| What do you intend to do after the voluntary service? |
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| Details about your sending organisation (contact person, e-mail, phone, fax) |
| **Name:** **Address:** **Contact person:** **Phone number**: **Fax**: **Email address**: **Website**:  |
| Please describe how you created the contact with your sending organisation, describe your co-operation and possible future plans. |
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| Why did you choose Estonia for your ESC project? |
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| ***Considering cultural and religious differences, what do you think could become an obstacle for you when adapting to our everyday life?*** |
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| Have you ever been to Estonia? Where and for how long? |
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| Describe your travel experience to other countries? |
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| What is the longest time you spent abroad? |
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| Additional information |
| Do you have driving licence? |
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| Are you physically handicapped? |
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| Are you allergic against plants, animals, or other things?  |
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| Do you have other health problems? |
|  |
| Are there things you can not do for health reasons? |
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| Do you need any special diet (vegetarian etc)? |
|  |
| Do you smoke? |
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| Do you have any objection to sharing a room? If you answer is Yes, please explain why |
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| Person to contact for questions in case of emergency (contact person) |
| Family name | (Mr/Ms) |  | First name |  |
| Relations with applicant |  |
| Address  |  |
| Home phone nr. |  | Mobile nr. |  |