**TRAINING COURSE**

**29 November - 6 December 2013 | FARO - PORTUGAL**

**“A TRAINING COURSE ON HOW TO INCREASE**

**YOUTH PARTICIPATION IN DECISION MAKING”**

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| **Name of the Organisation** |  |
| **Function in the organisation** |  |
|  |  |
| **First name:**  | **Surname:**  |
| Female [ ]  | Male [ ]  | **Date of Birth:**  |
| **Personal Address:**  |
| **Postal Code** | **City** | **Country** |
|  |  |  |
| **Phones** | **Area Code** | **Number** | **BANK DETAILS (refund)** |
| **Work** |  |  | **IBA*N:*** |  |
| **Home** |  |  | **SWIFT** |  |
| **Fax** |  |  | **Account number:**  |  |
| **Mobile phone**  |  |  | **Name of the bank:** |  |
| **E-mail** |  | **Address of the bank:** |  |
| **Special Needs** (Food; accommodation, others) |  |

1. *Why do you want to participate in this training course?*

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1. *How did you receive this call?*

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1. *What do you expect to learn from the training course?*

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1. *What are the main obstacles youth is facing to participate in local youth councils/ youth forums or similar structures in your local community?*

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1. *How do you plan to transfer this experience to your local reality (within your organisation/community/network/etc)?*

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1. *Language Knowledge: Are you able to work in English?* Yes [ ]  No [ ]

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| **Date and Signature of the Participant** | **Date and Signature of Organization****(stamp)** |

***Application form must be send to:***

sofia.martins@ecos.pt

**Deadline: 22th of October, 6 pm (CET)**