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| --- | --- |
| Family name:.......................................................  Sex:......................................................................  Date of birth:.......................................................  Place of birth:.....................................................  Current address:.................................................. | First name(s): ..................................................................  E-mail address:………………………………...............  Telephone:..............................................................  Passport Nr. and date of issue / Personal ID number:................................................................... |



“CHANGING PERSPECTIVES OF MEDIA EDUCATION AND POLITICAL DIALOGUE”

APPLICATION FORM

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| Education Level:  Bachelor’s  Master’s  PhD  None  Current Status:  Academic Personnel  Administrative Personnel  Student  In case of Academic/Administrative personnel, please indicate your position ………………………………………………..  ……………………………………………… .  In which group would you like to work?  Group 1: Debate  Group 2: Blog/Photo  Group 3: Audio Visual | Are you fluent in English?  Yes  No  Do you have English Language Proficiency  Certificate (IELTS/TOEFL)?  Yes  No  Have you participated in international project before?  Yes  No  Will you be able to attend all the workshops, which will take place in Odessa, Kiev and Yerevan?  Yes  No |

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| Kindly, please describe why would you like to participate in this project:  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………… |

Signature:

Date: