



STOWARZYSZENIE
ROZWOJU I INTEGRACJI
MŁODZIEŻY



ERASMUS+

EU programme for education, training, youth and sport

APPLICATION

FOR EVS PROJECT

COORDINATED OR HOSTED BY

STRIM

We would like to know a bit more about you, your interests, motivation and needs related to the EVS project. This application consists of two parts:

- Questionnaire for the Volunteer (to be completed by you)
- Questionnaire for the Sending Organization (to be completed by the representative of the Sending Organization)

In our recruitment process we consider only complete applications. Before you submit the application, make sure that both Questionnaire for the Volunteer and Questionnaire for the Sending Organization are filled in.

We are looking forward to receive your application!





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Questionnaire for the Volunteer

YOUR
PHOTO

Dear applicant, please tell us about...

The number and the title of the EVS project you are applying for

Fill in only if you know already this info:



Your personal details

| | | | |
|--|--|-------------|--|
| Family name | | | |
| First name | | | |
| Street address | | | |
| City | | Postal code | |
| Country | | Region | |
| Email | | Telephone | |
| Date of birth | | Gender | |
| Place of birth | | Nationality | |
| Highest level of education (choose 1 box only) | <input type="checkbox"/> primary education <input type="checkbox"/> vocational training <input type="checkbox"/> secondary education <input type="checkbox"/> higher education | | |
| Current situation (choose 1 box only) | <input type="checkbox"/> working <input type="checkbox"/> studying <input type="checkbox"/> unemployed <input type="checkbox"/> on training <input type="checkbox"/> long-term unemployed (> 6 months) <input type="checkbox"/> other.... | | |

Your emergency contact person

| | |
|-----------------------|--|
| Name and surname | |
| Address and telephone | |

Your Sending organisation

Note: in order to take part in our EVS recruitment you should have your sending organization. We can consider your application only if you provide us with following information:

| | | | |
|----------------|--|-----------|--|
| Name | | | |
| Street address | | | |
| Postal code | | Region | |
| City | | Country | |
| Email | | Telephone | |
| Website | | Telefax | |

Your background, experience and needs

| | |
|---|--|
| What is your social and educational background? | |
|---|--|



| | |
|--|--|
| Have you ever been living alone? | |
| Have you ever been living abroad? | |
| Have you ever participated in some European Programme (ex. Erasmus, Leonardo, Socrates, Youth in Action, Erasmus+) or do you have some international experiences such as travels abroad? | |
| Have you already worked with people from other cultural background? | |
| What are your language abilities? | <p>English: <input type="checkbox"/> native <input type="checkbox"/> fluent <input type="checkbox"/> good <input type="checkbox"/> basic <input type="checkbox"/> none</p> <p>Polish: <input type="checkbox"/> native <input type="checkbox"/> fluent <input type="checkbox"/> good <input type="checkbox"/> basic <input type="checkbox"/> none</p> <p>Other/s language/s: <input type="checkbox"/> native <input type="checkbox"/> fluent <input type="checkbox"/> good <input type="checkbox"/> basic</p> |
| Have you ever had any serious health problems? Do you have any chronic disease (ex. diabetes, heart disease, asthma or other)? Do you take regularly any prescribed medications? | |
| Do you have any special needs (ex. dietary needs, health care)? | |
| Do you find yourself as a person with fewer opportunities (disadvantaged due to some serious reasons such as disability, social or economic obstacles, health problems or other)? | |



Last not least, please tell us about other important stuff/practicalities

Your motivation

| | |
|---|--|
| What does the "Volunteer" means for you? | |
| Have you ever worked as a volunteer in your country? If yes, please tell us briefly about your experiences. | |
| How did you get in touch with EVS program and why would you like doing it? | |
| Are you studying, working or doing something else? How will you combine this with your EVS? Do you have to leave school/job for your EVS project? | |
| Which are your expectations, fears and needs for your EVS experience? | |
| What do you know and what do you think about Non-formal and Informal Education? | |

Your interest in the EVS project

| | |
|--|--|
| Why do you find this project interesting? Do you have any experiences in a similar work? | |
| How do you imagine the work to be? | |
| How would you like to contribute to the project? What kind of activities/ideas would you like to realize? | |



Why did you choose Poland for your EVS?

What does it mean for you to live and work abroad?

What does it mean for you to stay away for a long period of your life from everything what you consider precious in your country (ex. home, family, friends, passions, school/work)?

Do you think you can have problem in sharing an apartment or a room with others persons? If some problems would appear, how do you think to solve them?

Do you see yourself as a self-reliant person?

Do you smoke tobacco?

Your comments/additional info

If you would you like to add something what you find important but what was not mentioned in this application, please leave a comment:

Thank you for taking time to complete your part of the application!

What's next?

Your sending organization should fill in the second part of the application: Questionnaire for the Sending Organization.

Should you have any doubts, questions, comments or uncertainties... feel free to contact us. Our team and our volunteers will be more than happy to fulfil your curiosities!

Ps. Don't forget to find/like us on facebook: [STRIM](#) 😊

Questionnaire for the Sending Organization*



** this part has to be completed by the representative of the Sending Organization*

| About the organization | |
|---|--|
| Name: | |
| Phone: | |
| Fax: | |
| Email: | |
| Address: | |
| Code PIC | |
| The sending organisation accreditation (EI) number: | |
| Contact Person: | |

| Questions | |
|--|--|
| How did you select the volunteer? | |
| What kind of preparation will you provide the volunteer with? | |
| How do you organise the pre-departure training for the volunteers? | |

Thank you!

