



***Application Form***

***“Antygypsism – Mobile Books”***

***Date: 04-12 October 2015***

***Venue: Macedonia***

***Participant’s details:***

|  |  |
| --- | --- |
| **Name and Surname:** |  |
| **Country:** |  |
| **Age:** |  |
| **Gender:** |  |
| **Address:** |  |
| **e-mail:** |  |
| **Mobile Phone:** |  |

***Organization’s Details:***

***(If you are applying as individual do not fill this field)***

|  |  |
| --- | --- |
| **Name of organization / institution:** |  |
| **Type of organization (NGO, public body…)** |  |
| **Country:** |  |
| **Address:** |  |
| **e-mail:** |  |
| **Phone/fax:** |  |
| **Web:** |  |

***Please answer the following questions:***

***(If you are applying as individual do not fill this field)***

**What is your role in your organization/institution (employed youth worker, volunteer, project coordinator…)**

**How can you contribute for this activity as a participant?**

**Why do you want to participate in this project?**

**Do you have any special needs?**

**How much cost the cheapest kind of transport from your town to Skopje and back?**

**Please send the filled application form to** **mobilebooks\_tc@yahoo.com** **by:**

***DEADLINE: 31th of August 2015***

***Good Luck☺ !***