

**APPLICATION FORM**

 "Collaborative consumption - Chance for Sharing"

TC 23rd-30th July, Bakuriani, Georgia

Organized by Youth Together & International Center for Peace and Integration

|  |  |  |
| --- | --- | --- |
|  | Name |  |
| Surname |  |
| Sex |  |
| Date of birth |  |
| Place of birth |  |
| Address (complete) |  |
| Nationality |  |
| Telephone |  |
| E-mail |  |
| Passport/ID number |  |
| *Please, fill all the boxes!* |
| What is your job/studies/other at the moment? |
|  |
| What is your professional experience in third sector? |
|  |
| Do you have any knowledge or practical experience in collaborative consumption/sharing economy? |
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| Which are your main reasons for participating in this training course? |
|  |
| What could be your contribution for the success of the training course?  |
|  |
| What do you want to gain from this training course (please give us the 3 most important outcomes of this training for you personally)?  |
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| How do you plan to use the knowledge gained during this training course (please be specific)? |
|  |
| Do you have any special need? (dietary, health, etc…) |
|  |
| Please, tell us one of your favourites famous quotes! |
|  |
| *Thank you!* |