



## Application form

Surname:	_____	<div style="border: 1px solid black; width: 150px; height: 150px; text-align: center; vertical-align: middle;">Foto</div>	
First name:	_____		
Date of birth:	_____		
Place of birth:	_____	Nationality:	_____
Address: (Street, City, Country)	_____		
Telephone (including country code):	_____	E-mail:	_____

Current situation (work, study / further education, vocational orientation course, without particular engagement, or something else):

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# JOINT

Milano, Via della Commenda 37, 20122 Tel. 02/5517750  
Milano, Via Giovanola 25C, 20142 Tel. 02/89511514 Fax. 02/44381079  
Torino, Via Petrarca 12, 10126 Tel. 011/6691055  
[www.jointweb.it](http://www.jointweb.it) [info@jointweb.it](mailto:info@jointweb.it)



Voluntary-work experiences (both current and previous; with dates)

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Other skills (Hobbies, sports, music, theatre, cooking, computer, paintings...)

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Please try to describe briefly your personality and consider especially the following aspects: strengths/weaknesses, which values are important to you, which role do friends play in your life, importance of school/education and work/career.

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Please describe your previous travel experiences (where to? How long? Why?)

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Please describe briefly your family and consider especially the following aspects: how does your family see your plan to take part to such a meeting for a while.

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Please describe your motivation to take part in this program, your expectations (what do you hope to gain from it?). How do you think you can contribute to the project?

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Do you require a special diet ? If yes, please give details :

Do you suffer from any allergies ? If yes, please give details :

Are there other things the Hosting organisation should know ?

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Where did you get information of this event from?

Name of institution:

Kind of institution (school, youth information centre, c.a.g.):

Address/e-mail/website:

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Contact address in the event of emergency

Name:

Relationship:

Address (Street, house nr; post code, city, country)

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Home phone: \_\_\_\_\_ mobile phone \_\_\_\_\_

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I have completed this form personally.

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Date and place

Signature

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