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| CORPS EUROPÉEN DE SOLIDARITÉ  « TAKE OFF RELOADED »  FORMULAIRE DE CANDIDATURE | | | | | | | | | | | | | | | | | | | | | | |
| Contact details: | | | | | | | | | | | | | | | | | | | | | | |
| Name: *Nom* | |  | | | | | | | | | | | | | |  | | Photo | | | | |
| Surname: *Prénom* | |  | | | | | | | | | | | | | |
| Address: *Adresse* | |  | | | | | | | | | | | | | |
| City: *Ville* | |  | | | | **POSTAL CODE:**  ***Code Postal*** | | | |  | | | | | |
| Region*: Région* | |  | | | | **Country: *Pays*** | | | |  | | | | | |
| Telephone:  *(With prefix)* | |  | | | | | | | | | | | | | |
| Mobile: *Portable*  *(With prefix)* | |  | | | | | | | | | | | | | |
| E-mail: | |  | | | | | | | | | | | | | |  | | | | |
| N° de participant au corps europeen de solidarité: *(ESC NUMBER)* | |  | | | | | | | | | | | | | |  | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Personal Information: *Informations personnelles* | | | | | | | | | | | | | | | | | | | | | | |
| Date of birth:  *Date de naissance* | ../../..... | | | | **Place of birth:**  ***Lieu de naissance:*** | | | | | | | | | | | |  | | | | | |
| Nationality: *nationalité* |  | | | | **Gender: *genre*** | | | | | | | | | | | |  | | | | | |
| N° Passeport/ ID: |  | | | | **date d’émission du passeport/id:**  *DATE OF ISSUE OF THE CNI / PASSPORT* | | | | | | | | | | | |  | | | | | |
| date d’expiration du passeport/id :  *EXPIRATION DATE OF THE CNI/PASSPORT* |  | | | | **Social security number/ *N° de sécurité sociale*** | | | | | | | | | | | |  | | | | | |
| Do you have any allergies? *Avez-vous des allergies?* | | | | | | | | | | | 🞐 | | Yes *oui* | | | | | | 🞐 | | No *Non* | |
| Are you vegetarian? *Etes-vous végétarien?* | | | | | | | | | | | 🞐 | | Yes *oui* | | | | | | 🞐 | | No *Non* | |
| Can you drive? *Avez-vous le permis de conduire?* | | | | | | | | | | | 🞐 | | Yes *oui* | | | | | | 🞐 | | No *Non* | |
| Have you already been abroad? *Avez-vous déjà été à l’étranger?* | | | | | | | | | | | 🞐 | | Yes *oui* | | | | | | 🞐 | | No *Non* | |
| Where have you been abroad?  *Où avez-vous été à l’étranger*? | | |  | | | | | | | | | | | | | | | | | | | |
| For how long?  *Combien de temps* | | | 🞐 | < 3 months /  3 *mois* | | | 🞐 | | < 6 months/  6 *mois* | | | 🞐 | | | < 1 year /  1 *an* | | | | | 🞐 | | > more than 1 year /  plus d’un an |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Emergency contact: *Personne à contacter en cas d’urgence* | | | | | | | | | | | | | | | | | | | | | | |
| Surname: *Nom* | |  | | | | | | **Name*: Prénom*** | | | | | |  | | | | | | | | |
| Address: *Adresse* | |  | | | | | | **City: *ville*** | | | | | |  | | | | | | | | |
| Region: *Région* | |  | | | | | | **Country: *Pays*** | | | | | |  | | | | | | | | |
| Telephone: *Téléphone*  *(With prefix)* | |  | | | | | | Mobile: *Portable*  *(With prefix)* | | | | | |  | | | | | | | | |

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| Education and/or vocational training: *éducation et/ ou formation professionnelle* | | | | | | | | | | | | | | | |
| Highest level of education  *niveau d’études* | | | | 🞐 | | | Primary education  *Enseignement primaire* | | | 🞐 | | Vocational training  *Formation professionnelle* | | | |
| 🞐 | | | Secondary education  *Enseignement secondaire* | | | 🞐 | | Higher education  *Etudes supérieures* | | | |
|  | | | | | | | | | | | | | | | |
| From - to De-à | | | | |  | | | | | | | | | | |
| Institution Etablissement | | | | |  | | | | | | | | | | |
| main subjects  *Spécialité* | | | | |  | | | | | | | | | | |
| abilities developed  *Apprentissages* | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| From - to De-à | | | | |  | | | | | | | | | | |
| Institution Établissement | | | | |  | | | | | | | | | | |
| main subjects  *Spécialité* | | | | |  | | | | | | | | | | |
| abilities developed  *Apprentissages* | | | | |  | | | | | | | | | | |
| Work experiences:  *expérience professionnelle* | | | | | | | | | | | | | | | |
| WHICH ONES OF YOUR WORK EXPERIENCES WERE IMPORTANT TO YOU? WHY?  *Quelles sont les expériences professionnelles qui t’ont le plus apporté ? Pour quelles raisons ?* | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| WHAT DID YOU LEARN DURING YOUR PROFESSIONNAL EXPERIENCES THAT COULD BE RE-USED DURING THE ESC?  *Qu’as-tu appris au cours de tes expériences professionnelles que tu penses pouvoir réutiliser dans le volontariat ?* | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Current situation: *Situation actuelle* | | | | | | | | | | | | | | | |
| Current situation *Situation actuelle* | | 🞐 | Working  *Salarié* | | | | | | | | 🞐 | | | Studying  *Etudiant* | |
| 🞐 | Unemployed  *Sans emploi* | | | | | | | | 🞐 | | | Training  *En formation* | |
| 🞐 | Long-term unemployed (>6 months)  *Chômeur long durée (>6 mois)* | | | | | | | | 🞐 | | | Other  *Autre* | |
| Please specify:  *spécifier:* | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| Language ability: *Langues parlées* | | | | | | | | | | | | | | | |
| Language  *Langue* |  | | | | | **Basic**  *Basique* | | **Intermediate**  *intermédiaire* | **Good**  *Maîtrise* | | | | **Fluent**  *Courant* | | Mother tongue  *Langue maternelle* |
| English *Anglais* | Oral / *oral* | | | | |  | |  |  | | | |  | |  |
| Written / *écrit* | | | | |  | |  |  | | | |  | |
| Read / *lu* | | | | |  | |  |  | | | |  | |
| French *Français* | Oral / *oral* | | | | |  | |  |  | | | |  | |  |
| Written / *écrit* | | | | |  | |  |  | | | |  | |
| Read / *lu* | | | | |  | |  |  | | | |  | |
| Italian  *Italien* | Oral / *oral* | | | | |  | |  |  | | | |  | |  |
| Written / *écrit* | | | | |  | |  |  | | | |  | |
| Read / *lu* | | | | |  | |  |  | | | |  | |
| Spanish  *Espagnol* | Oral / *oral* | | | | |  | |  |  | | | |  | |  |
| Written / *écrit* | | | | |  | |  |  | | | |  | |
| Read / *lu* | | | | |  | |  |  | | | |  | |

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| **Non formal education: *éducation non formelle*** | | | | | | |
| **Please, put an X in the activities in which you have some experience and/or the ones that are interesting for you.**  ***Mettez une croix dans les activités que vous avez pratiqué et/ou qui vous intéressent.*** | | | | | | |
|  | | | | | | |
| 🞐 | Volunteering Volontariat | | 🞐 | Youth exchanges  *Échange des jeunes* | 🞐 | National Civil Service  *Service Civique Volontaire (SCV)* |
| 🞐 | Theatre  *Théâtre* | | 🞐 | Summer camps  *Camps d’été* | 🞐 | Erasmus  *Erasmus* |
| 🞐 | Music  *Musique* | | 🞐 | International training courses  *Formation internationale* | 🞐 | Communication on social networks  *Communication sur les réseaux sociaux* |
| 🞐 | Painting  *Peinture* | | 🞐 | Developement of a local project  *Développement d’un projet local* | 🞐 | Stages/Internships  *Stages* |
| 🞐 | Singing  *Chant* | | 🞐 | Sports  *Sport* | 🞐 | Handicraft  *Artisanat* |
| 🞐 | Sailing  *Navigation* | | 🞐 | School exchanges  *Échange scolaire* | 🞐 | Cooking  *Cuisine* |
| 🞐 | animation with children  *Animation auprès d’enfants* | | 🞐 | Organisation of events  *Organisation d’évènements* | 🞐 | Other (spécify)  *Autre (spécifiez)* |
|  | | | | | | |
| **Please give some details about your experiences**  ***Veuillez fournir quelques détails sur vos activités préférées*** | | | | | | |
| From - to De-à | |  | | | | |
| course/activity cours/activité | |  | | | | |
| Organised by… Organisé par… | |  | | | | |
| I have learned…  *J’ai appris…* | |  | | | | |
|  | |  | | | | |
| From - to De -à | |  | | | | |
| course/activity cours/activité | |  | | | | |
| Organised by… Organisé par… | |  | | | | |
| I have learned…  *J’ai appris…* | |  | | | | |
|  | |  | | | | |
| From - to De- à | |  | | | | |
| course/activity cours/activité | |  | | | | |
| Organised by… Organisé par… | |  | | | | |
| I have learned…  *J’ai appris…* | |  | | | | |
|  | | | | | | |
| What are your hobbies?  *Quelles sont vos activités de loisirs, bénévolat, sport, autres?* | | | | | | |
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| MOTIVATION FOR TAKING PART IN EVS : Motivations pour participer à un volontariat européen |
| WHAT IS YOU MAIN REASON FOR GOING ABROAD? WHY THE EUROPEAN SOLIDARITY CORPS?  *Pourquoi souhaitez-vous partir à l’étranger ? Pourquoi avoir choisi le cadre du corps européen de solidarité?* |
|  |
| WHAT WOULD YOU LIKE TO ACHIEVE DURING YOUR EXPERIENCE ABROAD?  *Que souhaitez vous accomplir pendant votre expérience à l’étranger ? Que souhaitez vous partager avec la structure qui vous accueillera ?* |
|  |
| WHAT KNOWLEDGE AND SKILLS CAN YOU SHARE DURING ESC ?  *Quelles sont les compétences/connaissances que vous pensez pouvoir utiliser pendant votre volontariat ?* |
|  |
| HOW WOULD YOU DESCRIBE YOUR STRENGHTS AND WEAKNESSES?  *Quels seraient selon vous vos points forts et vos points faibles pour la réalisation d’un volontariat européen?* |
|  |
| WHICH PROBLEMS DO YOU THINK YOU WILL ENCOUNTER ABROAD, LIVING IN A DIFFERENT CULTURE WITH A DIFFERENT SET OF VALUES?  *Selon vous, quels problèmes pourriez-vous rencontrer à l’étranger, dans un contexte interculturel ?* |
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| Details regarding the hosting project *Information complémentaire pour les projets d’accueil* | | | | | | | | | | | |
| Please, identify the kind of project you are looking for by ordering the following themes and target groups from 1 to 3.  *S’il vous plaît, identifiez le genre de projets où vous voulez participer selon les thèmes et groupes cibles de 1 à 3* | | | | | | | | | | | |
| Main themes  *Thèmatiques principales de 1 à 3* | | | | | Main target groups  *Groupes cibles principaux de 1 a 3* | | | | | |
|  | Equal opportunities  *Egalité des chances* | |  | Environment protection  *Protection de l’environnement* |  | | Youth & children  *Jeunesse et Enfance* |  | Migrants  *Migrants* | |
|  | Active citizenship  *Citoyenneté active* | |  | Leisure time  *Loisirs* |  | | Elderly  *Personnes agées* |  | Local community *Communauté locale* | |
|  | Heritage progection  *Patrimoine artistique et culturel* | |  | Youth policies  *Politiques jeunesse* |  | | Disabled  *Handicapés* |  |  | |
|  | Social exclusion  *Esclusion sociale* | |  | Art and culture  *Art et culture* |  | | Homeless  *Sans-abris* |  |  | |
|  | Health  *Santé* | |  | Youth information  *Information jeunesse* |  | | Unemployed *Chômeurs* |  |  | |
| Others – *autre* | | | | | | | | | | | |
|  | | | | | | | | | | | |
| *MERCI DE MENTIONNER CI-DESSOUS LES TROIS MISSIONS POUR LESQUELLES TU SOUHAITES CANDIDATER* | | | | | | | | | |  | |
| Priority 1: *Priorité 1* | |  | | | | | | | | | |
| Priority 2: *Priorité 2* | |  | | | | | | | | | |
| Priority 3*: Priorité 3* | |  | | | | | | | | | |
|  | | | | | | | | | | | |
| I, the undersigned, certify that all information contained in this application is certified truthful and accurate and that no relevant information has been withheld.  *JE SOUSSIGNE, CERTIFIE QUE TOUTE INFORMATION INDIQUÉE DANS CE FORMULAIRE EST CORRECTE ET QUE JE N’AI RETENU AUCUNE INFORMATION IMPORTANTE* | | | | | | | | | | | |
| Place & Date *date et lieu* | | | | | | Signature of volunteer *signature du volontaire* | | | | | |
|  | | | | | |  | | | | | |