**APPLICATION FORM FOR ACCREDITORS FOR EUROPEAN VOLUNTARY SERVICE WITHIN THE ERASMUS+ PROGRAMME**

1. **Personal information**

|  |  |
| --- | --- |
| Name: |       |
| Date of birth: |  |
| Address of permanent residence: |  |
| E-mail: |  |
| Mobile phone: |  |
| Profession:  |  |
| Workplace: |  |
| Address: |  |
| Phone number: |  |

1. **General professional experience**

|  |
| --- |
| Indicate the years of experience in the field of non-formal education or youth work:      Describe your area of expertise and your experience in the field of non-formal education or youth work      |

1. **Specific professional experience**

|  |
| --- |
| 1. Describe your experience with the Youth in Action programme, specifically with the European Voluntary Service
 |
|       |
| 1. Describe any previous experience regarding accreditation or management/implementation/evaluation of EU funded projects (optional).
 |
|       |
| 1. Describe any other previous professional experience that is relevant for accreditation of organisations for participation in the European Voluntary Service under the Erasmus + programme , e.g. participation in relevant working groups, development of relevant policy documents, participation in relevant trainings (optional).
 |
|       |
| 1. Please describe your English language skills:
 |
| * writing (basic, intermediate, advanced):
* reading (basic, intermediate, advanced):
* conversation (basic, intermediate, advanced):
 |
| 1. Please describe your IT skills (basic, intermediate, advanced)
 |
|  |

|  |
| --- |
| 1. Please describe the level of literacy in Croatian language (basic, intermediate, advanced)
 |
|       |

**Please fill in the application electronically and sign it. Please attach all other relevant documentation as stated in the Call.**

I hereby assume responsibility for all the information provided in the Application. Furthermore, I confirm that I will inform the Agency for Mobility and EU Programmes of any changes in the provided information in a timely manner. I also confirm that I am willing to sign a non-conflict of interest statement and to carry out the assigned tasks in accordance with the instructions and the timeframe set by the Agency for Mobility and EU Programmes.

|  |  |
| --- | --- |
| **Date:** | **Signature:** |
|       |       |