

CONTACT DETAILS:	
NAME:	PHOTO
SURNAME:	
ADDRESS:	
CITY:	
REGION:	
TELEPHONE: <i>(With prefix)</i>	
MOBILE: <i>(With prefix)</i>	
E-MAIL:	
NR:	
POSTAL CODE	
COUNTRY:	
PERSONAL DATA:	
DATE OF BIRTH:	
NATIONALITY:	GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DO YOU HAVE ANY ALLERGIES?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, SPECIFY	
DO YOU HAVE ANY PARTICULAR DIETARY NEEDS?	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF, YES SPECIFY	
HAVE YOU ALREADY BEEN ABROAD?	<input type="checkbox"/> YES <input type="checkbox"/> NO
WHERE?	
FOR HOW LONG?	<input type="checkbox"/> < 3 MONTHS <input type="checkbox"/> < 6 MONTHS <input type="checkbox"/> < 1 YEAR <input type="checkbox"/> > 1 YEAR
EMERGENCY CONTACT:	
SURNAME:	NAME:
ADDRESS:	N° CITY:
REGION:	COUNTRY:
TELEPHONE: <i>(With prefix)</i>	MOBILE: <i>(With prefix)</i>

Je danse donc je suis

Paris, 28 June – 07 July 2020

Application form for participants

Please answer these questions:

LANGUAGE ABILITY:						
LANGUAGE		BASIC	INTERMEDIATE	GOOD	FLUENT	MOTHER TONGUE
ENGLISH	ORAL					
	WRITTEN					
	READ					
	ORAL					
	WRITTEN					
	READ					
	ORAL					
	WRITTEN					
	READ					

NON FORMAL EDUCATION:		
PLEASE, PUT AN X IN THE ACTIVITIES IN WHICH YOU HAVE SOME EXPERIENCE.		
<input type="checkbox"/>	VOLUNTEERING	<input type="checkbox"/>
<input type="checkbox"/>	THEATRE	<input type="checkbox"/>
<input type="checkbox"/>	MUSIC	<input type="checkbox"/>
<input type="checkbox"/>	PAINTING	<input type="checkbox"/>
<input type="checkbox"/>	SINGING	<input type="checkbox"/>
<input type="checkbox"/>	DANCING	<input type="checkbox"/>
<input type="checkbox"/>	JUGGLING	<input type="checkbox"/>
<input type="checkbox"/>	SPORTS	<input type="checkbox"/>
<input type="checkbox"/>	ENVIROMENT	<input type="checkbox"/>
<input type="checkbox"/>	HANDCRAFT	<input type="checkbox"/>
<input type="checkbox"/>	MEDIA AND COMMUNICATION	<input type="checkbox"/>
<input type="checkbox"/>	ORGANISATION OF EVENTS	<input type="checkbox"/>
<input type="checkbox"/>	YOUTH INFORMATION	<input type="checkbox"/>
<input type="checkbox"/>	SUMMER CAMPS	<input type="checkbox"/>
<input type="checkbox"/>	GRAFFITI	<input type="checkbox"/>
<input type="checkbox"/>	YOUTH EXCHANGES	<input type="checkbox"/>
<input type="checkbox"/>	ART AND CULTURE	<input type="checkbox"/>
<input type="checkbox"/>	OTHER	<input type="checkbox"/>
SPECIFY:		
DO YOU HAVE ANY EXPERIENCE IN THE CATEGORIES COVERED IN THIS YOUTH EXCHANGE? PLEASE DESCRIBE.		
<input type="checkbox"/> Dance (please specify the kind of dance below)		
<input type="checkbox"/> Other Arts		



MOTIVATION TO TAKE PART IN THE YOUTH EXCHANGE:

WHAT DO YOU THINK YOU CAN ACHIEVE WITH THIS YOUTH EXCHANGE?

WHAT DO YOU THINK THAT YOU CAN SHARE DURING THIS YOUTH EXCHANGE?

DESCRIBE YOURSELF IN THREE WORDS.

THANK YOU FOR YOUR TIME!

LOOKING FORWARD TO WELCOMING YOU IN FRANCE 🇫🇷

