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**APPLICATION FOR THE PARTICIPATION
IN THE CERTIFICATION PROCESS**

First Name:

Last Name:

Birth Date:

Occupation:

City:

Country:

Email:

F M

Gender:

Institute of Vocational Training

Technological Educational Institution "

Choose your educational background and indicate below your studies:

University "

Master " "

Doctoral Degree

Overall Experience in the field of NGOs (in months):

Executive / Manager

Choose your type of certification:

Volunteer

Required fields are: First name, Last name, City, Country, Email, and Type of Certification.

Leader: Movement of Voluntary Associations Italian
Partners: Institute of Entrepreneurship Development
Telepedagogic Knowledge Centre AB Youth for Exchange and
Understanding International
University of Economics in Krakow