



# International Federation of Hard of Hearing Young People (IFHOHYP)

## APPLICATION FORM

to participate in the

### **Study Session** **“Striving towards policy impact, awareness raising and access to social rights”**

to be hold at the

**European Youth Centre Strasbourg**  
**20-27th November, 2011**

IMPORTANT: Applying does not mean you will participate in the study session. Participants will be selected on the basis of motivation, experience, learning needs and seeking balance between the countries of procedence.

Fill in the form by yourself. If someone helps you to fill in the application, please indicate below.

#### ■ PERSONAL DETAILS

Surname:

First name:

Address:

ZIP Code:  Town of residence:

Country of residence:  Nationality:

Home telephone:  Mobile:

E-mail:

Date of birth:  Sex:  Male /  Female

#### ■ ORGANIZATION DETAILS

Name of your organization:

Address of your organization:

ZIP Code:  Town:

Country:

Telephone:  Fax:

E-mail:

Website:

Your position or responsibilities in your organization:

## ■ EXPERIENCE AND MOTIVATION

**1. Explain briefly your experiences in activities/work related to hard of hearing people.**

**2. What kind of projects involving hard of hearing people on local, regional, national or international level have you participated in? Please explain.**

**3. What kind of projects involving hard of hearing people on local, regional, national or international level have you run?**

**4. Do you have any experiences with non-formal education (running workshops, group discussions, trainings)? Please explain your answer.**

**5. In your opinion, what makes / is necessary for a good advocacy or a successful lobbying?**

**6. Do you have any experiences in advocacy or lobbying? Please explain what experiences.**

**7. Please explain your interest in the theme of this study session (influencing policies; access to social rights; awareness-raising)**

**8. What is your motivation to take part in this study session? Please explain.**

**9. What are your needs and expectations for this study session? Please be concrete and specific as much as possible.**

**10. What concrete contribution (programme design skills, human rights knowledge, advocacy, lobbying, social inclusion, awareness raising skills, intercultural learning, etc...) can you make to the study session?**

**11. How do you plan to use the skills and knowledge gained at this study session on the local level in your organization or on the regional/ national level such as influencing your regional government or country?**

**12. What kind of project or training do you think you can undertake after the study session in your organization or community that is related to the topic of the study session?**

**13. Are you hard-of-hearing?**  Yes /  No

**14. You need to be able to work (speak and understand) in English in order to participate in this study session without help from others. My level of English (tick the right box):**

Understanding:  Basic  Intermediate  Fluent

Speaking:  Basic  Intermediate  Fluent

Writing:  Basic  Intermediate  Fluent

**15. Do you have any special needs or requirements? (e.g. dietary, disability, etc.)**

**16. If you are accepted, will you be able to attend the entire duration of the study session?**

Yes /  No

**If no, please indicate the reasons and duration for any absence:**

**17. I filled in this form by myself?**  Yes /  No

**If no, what kind of help did you get?**

### ■ TRAVEL COSTS

**18. Please estimate your travel costs to and from Strasbourg (you will be asked to choose the least expensive route possible) in Euros:**

**19. Means of transport (air plane/train/bus):**

## ■ VISA REQUIREMENTS AND REQUESTED INFORMATION

Participants needing visa to enter France should contact the French Consulate service in their country sufficiently in advance to secure the visa. The Directorate of Youth and Sports of the Council of Europe can offer visa support producing a letter of invitation for you to apply for the visa. If you need this support, reply “yes” in the following question and provide your personal details.

Participants coming from non Council of Europe member countries need visa. Participants from the following CoE countries also need visa: Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Georgia, Kosovo, Moldova, Russian Federation, Turkey, Ukraine. Participants from Estonia, Latvia and Lithuania having a non-national passport also need visa.

**20. If you are accepted as a participant of this course, will you require assistance in obtaining a visa for France?**  Yes /  No

**If yes, please write data from your passport exactly:**

Surname:

Given names:

Address in passport (if different from above):

ZIP Code:  Town:

Country:

Telephone (without this, express mail delivery will not be possible):

Fax number (if available):

Passport Number:

Issued at (place):  on (date):

Expiry date of passport:

Date and place of birth:

Occupation (if employed) or student:

Location of French embassy to be applied to:

FAX number of French embassy in your country:

## ■ DEADLINE FOR SUBMITTING THE APPLICATION FORM

Deadline is:

**15 October, 2011**

This form must be sent to:

**[ifhohyp.studysession@gmail.com](mailto:ifhohyp.studysession@gmail.com)**

Should you have any further questions concerning this study session please feel free to contact the organizing team at the e-mail address above.

**SEE MORE ABOUT IFHOHYP AT [WWW.IFHOHYP.ORG](http://WWW.IFHOHYP.ORG)!**