



APPLICATION FOR ESC PROJECT COORDINATED BY



We would like to know a bit more about you, your interests, motivation, and needs related to the ESC project. This application consists of two parts:

- 1. Questionnaire for the Volunteer (to be completed by you)
- 2. Questionnaire for the Supporting Organization (to be completed by the representative of the Supporting Organization)

In our recruitment process, we consider only <u>complete applications</u>. Before you submit the application, make sure that both the Questionnaire for the Volunteer and the Questionnaire for the Supporting Organization are filled in.

We are looking forward to receiving your application!

Questionnaire for the Volunteer



Dear applicant, please tell us about...

Receiving Organization of the STRIM's project you are applying for

Fill in only if you know already this info:





Your personal details					
Family name					
First name					
Street address					
City		Postal code			
Country		Region			
Email		Telephone			
Date of birth		Gender		male/female/other	
Place of birth		Nationality			
Highest level of education (Mark with an "X", choose 1 box only) Current situation (Mark with an "X")	Primary education: Vocational training: Secondary education: Higher education: Working Studying				
	Unemployed On training				
	Long-term unemployed (>	6 months)			
	Other				
	Your emergend	cy contact	person		
Name, surname, and relation					

Your Supporting Organization

Note: In order to take part in our ESC recruitment you should have your supporting organization. We can consider your application only if you provide us with the following information:

Address and telephone





Name		
Street address		
PIC/OID number		
Postal code	Region	
City	Country	
Email	Telephone	
Website		





Your	background, experience and needs	5		
What is your social and educational background?				
Have you ever been living alone? For how long? How did you find yourself in that situation?				
Have you ever been living abroad? For how long? How did you find yourself in that situation?				
Have you ever participated in some European Programme (ex: Erasmus, Leonardo, Socrates, Youth in Action, Erasmus+, ESC) or do you have some international experiences such as travels abroad?				
Have you already worked with people from another cultural background?				
What are your language abilities?				
Have you ever had any serious health problems? Do you have any chronic diseases (ex. diabetes, heart disease, asthma, or other)? Do you regularly take any prescribed medications? This info can help us to provide as good care/conditions as possible for you				
Do you have any special needs (ex. dietary needs, health care)? Your honest answer will help us to be prepared for hosting you.				
Do you consider that in your life you face some of the following obstacles:		YES	NO	1
(Mark with a "X")	Disability / special needs – e.g. mental (intellectual, cognitive, learning), physical, sensory, or other disabilities			
	Health problems - e.g. chronic health problems, severe illnesses, or psychiatric conditions			
	Educational difficulties - e.g. learning difficulties, early school-leaver, poor school performance			
	Cultural differences - e.g. immigrant, refugees or with immigrant or refugee family background, belonging to a national or ethnic minority			
	Economic obstacles - e.g. low standard of living, low income, dependence on the social welfare system, long-term unemployment or poverty, debt or financial problems			
	Social obstacles - e.g. facing discrimination because of gender, ethnicity, religion, sexual orientation			
	Geographical obstacles - e.g. from remote or rural areas, young people living on small islands or in peripheral regions, young people from urban problem zones, young people from less serviced areas (limited public transport, poor facilities)			
if you're working or you have worked lately, please provide us with mail contact of your last employer/supervisor				





Your motivation		
What does the word "Volunteer" mean for you?		
Have you ever worked as a volunteer in your country? If so, please, tell us briefly about your experiences		
How did you get in touch with the ESC program and why would you like to take part in it?		
Are you studying, working or doing something else? How will you combine this with your ESC? Do you have to leave school/job for your ESC project?		
Which are your fears for your ESC experience?		
What are your expectations regarding your ESC experience?		
What do you know and what do you think about Non-formal and Informal Education?		

Your interest in the ESC project		
Why do you find this project interesting? Do you have any experience in similar work?		
How do you imagine the work to be?		
How would you like to contribute to the project? What kind of activities or ideas would you like to carry out?		





Last not least,	, please tell us about other important stuff/practicalities
Why did you choose Poland for your ESC?	
What does it mean for you to live and work abroad?	
What does it mean for you to stay away from everything that you consider important in your country (ex. home, family, friends, passions, school/work) for a long period of time?	
Do you think you can have problems sharing an apartment or a room with other people? If some problems would appear, how do you think that you would solve them?	
Do you see yourself as a self- reliant person?	
Did you vaccinate against covid- 19? If not, do you consider getting vaccinated when you come to Poland?	
Do you smoke? (your answer will not affect our decision)	

Your comments/additional info
If you would you like to add something what you find important but what was not mentioned in this application, please leave a comment:

Thank you for taking the time to complete your part of the application!

What's next?

Your supporting organization should fill in the second part of the application: Questionnaire for the Supporting Organization. Should you have any doubts, questions, comments or uncertainties... feel free to contact us. Our team and our volunteers will be more than happy to fulfill your curiosities!

Ps. Do not forget to find/like us on Facebook and/or on Instagram: 😌

Questionnaire for the Supporting Organization*

* This part has to be completed by the representative of the Supporting Organization





About the organization		
Name:		
Phone:		
Fax:		
Address:		
PIC number/ OID number		
The sending organization accreditation (EI) number/ Quality label:		
Contact Person:		

Questions		
How did you select the volunteer?		
What kind of preparation will you provide the volunteer with?		
How do you organize the pre- departure training for the volunteers?		

Thank you!

