



## Training Course Human Rights Education for Youth Trafficking Prevention

**Bulgaria, 5<sup>th</sup> – 11<sup>th</sup> August 2006**

### Application Form for Candidates from Partner Organizations

The TC is organised by  
Human Rights Club at Balkan Center for Regional Development and  
EuroMed Network for Youth Trafficking Prevention with the financial assistance of the  
YOUTH programme of the European Commission

The training course “Human Rights Education for Youth Trafficking Prevention” aims at youth leaders and activist from South East Europe, as well as at their colleagues from the UK and Netherlands, ready to share best practices and to work on joint projects.

Our partners are deliberately chosen to come from some of the most vulnerable to trafficking European countries: Bulgaria, FYROM, Serbia, Romania and Greece. Their partners from the UK and Holland are experienced in networking for trafficking prevention and human rights education.

We aim at improving the knowledge and skills of the young leaders and activists on the problems of trafficking prevention, as well as at introducing a new innovative approach to human rights education for youth trafficking prevention.

We are saying something new and doing something important: drawing attention to prevention of trafficking, rather than working with the victims of trafficking as most projects do.

**Please type or use CAPITAL letters and write legibly with a black pen. All entries must be filled in.**

#### Personal Data:

**The contact details you provide us below will be used for all correspondence!**

First Name [as on your passport]			Family Name [as on your passport]		
Citizenship		Date of Birth		Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Complete address					
Postal code		Town		Country	
Phone [with full international dial codes]			Fax [with full international dial codes]		
E-mail			Website		

**Human Rights Club at Balkan Center for Regional Development (HRC at BCRD)**

Email: [Human\\_Rights\\_club@abv.bg](mailto:Human_Rights_club@abv.bg)

Web page: [www.bcrd.net](http://www.bcrd.net)

**EuroMed Network for Youth Trafficking Prevention (EMNYTP)**, Email: [emnytp@youth-trafficking.net](mailto:emnytp@youth-trafficking.net)

Web page: [www.youth-trafficking.net](http://www.youth-trafficking.net)

**Language(s) abilities:** Please mention all languages in which you are able to work and indicate your level for each of it (N-none, B-basic, G-good, VG-very good, F-fluent, MT-mother tongue)

	Listening	Speaking	Reading	Writing
English				
French				
Native language [please specify]				
Other language(s) [please specify]				

Do you have any **special needs or requirements** that the host organisation should know about? (E.g. mobility, medical needs, allergies, dietary restrictions, smoker/non-smoker)

**Your organisation:**

Name			
Complete address			
Postal code	Town	Country	
Phone [with full international dial codes]		Fax [with full international dial codes]	
Email		Website	
Activity level	<input type="checkbox"/> local	<input type="checkbox"/> regional	<input type="checkbox"/> national <input type="checkbox"/> international

**Please describe your role in the organisation.**

What are your functions (youth worker, board member, youth leader ...) and your tasks?

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In what way are you involved (professional or voluntarily, full or part-time)?

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Since when have you been involved in youth work? What kind of youth projects you have taken part in?

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What is your involvement in Human Rights Education for young people?

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**Motivation and Expectations:**

Why do you want to participate in the TC?  
What do you expect to gain professionally and personally from it?

Do you have any personal experience in Action 5 activities? If yes, please describe.

Please indicate what is your level of knowledge and experience in those fields:

	Low	Medium	High
YOUTH Programme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human Rights Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth Trafficking Prevention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How do you want to use this Training Course? What possibilities do you have to develop projects on youth trafficking prevention afterwards?

Please indicate the project idea on human rights education for youth trafficking prevention you would like to share with the other participants in order to start drafting joint projects.

**Please indicate us the name and full contact details of a person to be contacted in case of emergency during the course**

Name					
Complete address					
Postal code		Town		Country	
Phone [with full international dial codes]			Fax [with full international dial codes]		
Email					

**Please take note of the following conditions that will apply if you are selected to take part in the training course.**

1. I commit myself to participate in the whole process, including:
  - to prepare myself carefully for the training course and to do all remote preparation work the team will ask for,
  - to take part in the full duration of the training course
  - to participate in the whole evaluation process
  - to set up and implement a project on youth trafficking prevention.
  - to set up and implement a project within the YOUTH programme afterwards.
2. I am aware that obtaining a health and a full travel insurance are my own responsibility and at my own expenses. I understand that the information I provided on my special needs does not remove my own personal responsibility for ensuring my own health.
3. I am aware that I need to cover 30 % of my travel expenses and to pay a participation fee, as specified for my country<sup>1</sup>.
4. I authorise MoE, EMNYTP and the European Commission to publish, in whatever form and by whatever medium, including the Internet, my correspondence address, information about my organisation and work and pictures taken at the course.

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**Supporting signatures:**

I confirm my organisation/institution/Local Authority wishes to take part in transnational activities through the **YOUTH programme** and that the above-named person has the support of my organisation and has obtained full permission to be released from his/her usual duties to undertake this training course.

Name and Position (manager/senior officer/board member) of organisation's representative:

Signature of organisation's representative: \_\_\_\_\_

Date: \_\_\_\_\_

**Applications should be sent to [emnytp@moe-online.com](mailto:emnytp@moe-online.com) not later than June 15<sup>th</sup>, 2006.**

**If for any reason you are no longer able to attend the course, please inform our coordinator Dimitrina Atanasova at [emnytp@moe-online.com](mailto:emnytp@moe-online.com) or tel: + 359 898657965 as soon as possible so that the MoE, SEE can ensure a replacement from the waiting list.**

<sup>1</sup> UK, NL, GR h– 30 Euro participation fee.  
RO, BG, SCG, FYROM – 15 Euro participation fee.