If you want to apply for an EVS project in Alcobendas - Spain, please complete this application form and send it to us by email to ejoven@imagina.aytoalcobendas.org , with your ***CV*** and ***Motivation Letter***.

|  |
| --- |
| **YOUR PERSONAL DETAILS** |
| Family name |  |
| First name |  |
| Gender: | [ ]  Male  | [ ]  Female |
| Date of birth |  | Place of birth |  |
| Address: Street, Post Code, City, Country |  |
| Nationality |  | Passport or ID number |  |
| Phone number |  | E-mail |  |

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| --- |
| **YOUR SENDING ORGANIZATION DETAILS** |
| Official Name |  |
| Address |  |
| Phone number |  | E-mail |  |
| Contact Person |  |
| PIC number |  |

|  |
| --- |
| **Language skills:** |
| **Language:** | **Fluent:** | **Good:** | **Basic:** |
| Spanish | [ ]  | [ ]  | [ ]  |
| English | [ ]  | [ ]  | [ ]  |
| Other 1 | [ ]  | [ ]  | [ ]  |
| Other 2 | [ ]  | [ ]  | [ ]  |
| Mother tongue |  |
| Others |  |

|  |
| --- |
| **More Info** |
| Do you smoke? | Yes [ ]   | No [ ]  | Are you vegetarian? | Yes [ ]   | No [ ]  |
| Do you have any special need, allergies…? Do you mind to live with people who have pets like dogs or cats? |
| Please give details: |
| Do you have any health related limitations which could influence your work as a volunteer? |
| If yes, please give details: |
| Would you like to add something else? |
|  |

**IMAGINA**

**C/ Ruperto Chapi,18 🞘 28100 Alcobendas 🞘 Spain**

**europa@imagina.aytoalcobendas.org**

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*All that is reported in compliance with Article 5 of Organic Law 15/1999, of December 13, on the Personal Protection Data.*