



## Application Form

### NOT JUST NUMBERS training – Turku, Finland

First name and Surname	
Name of the organization represented	

Country of residence	Gender	Date of Birth

Address	Postal code, Town and Country

Mobile phone (international dial code)	Skype name	Email

Level of your proficiency in English:

Fluent      Average      Basic      Poor

Do you have any special needs or dietary requirements that we should know about?  
(E.g. mobility, medical needs, allergies, dietary restrictions, etc.)

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Please indicate the name and full contact details of a person to be contacted in case of emergency during the training:

First name and surname	
Address	Postal code, Town and Country
Mobile phone (international dial code)	Email

Please, answer following questions:

**Motivation**

Why would you like to take part in this training?

**Expectations**

What would you like to gain from this course?

## **Dissemination**

Please specify your plans for disseminating the knowledge and skills gained at the training,

**The completed application form must be sent to:**

**[info@stepeurope.org](mailto:info@stepeurope.org)**

**by 1st November 2017.**