

**Application Form**

**for participation in the training seminar for young local leaders of Ukraine**

**organized by the Congress of Local and Regional Authorities**

**of the Council of Europe**

**25-27 April 2017, Odesa, Ukraine**

1. **Personal details**

|  |  |  |
| --- | --- | --- |
| **Family name** |  | *[color photo 3х4 cm]* |
| **Name** |  |
| **Patronymic** |  |
| **Age** |  |
| **Sex** | Male | Female |
| **Citizenship** |  |
|  |  |  |
| **Place of living** |
| **Oblast** |  |
| **City/region** |  |
| **Postal address and postal code** |  |
| **Phone:** |  |
| **E-mail:** |  |
| **Skype ID:** |  |

1. **Education, professional seminars, courses, internship programs, etc.** *(\*please start with the latest)*

**Education**

|  |  |  |
| --- | --- | --- |
| **Dates**  | **Diploma** | **Name of Educational Institution** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Language skills** *(Please indicate languages spoken and level: not speaking, basic, intermediate, fluent)*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Reading** | **Writing** | **Speaking** |
| **Ukrainian** |  |  |  |
| **Russian** |  |  |  |
| **English** |  |  |  |
| **Other** |  |  |  |
| **Other** |  |  |  |

**Professional seminars, trainings, courses, internship programs, etc.** *(\*add lines if needed)*

|  |  |  |
| --- | --- | --- |
| **Dates** | **Event/Program** | **Name of organization** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Professional activity** *(\*Please start with latest)*

**Latest place of work and position**

|  |  |
| --- | --- |
| **Name of organization** |  |
| **Organization’s field of activity***(NGO, Political unit/organization, local self-government, Mass media, etc.)*  |  |
| **Position held** |  |
| **Date of appointment or election***For volunteers: date of accepting your obligations* |  |
| **Brief description of job responsibilities** |  |
| **Authorities, enterprises, organizations, civil unions etc., which you most often co-operate with in the framework of your job responsibilities** |  |

**Previous professional experience**

|  |  |  |
| --- | --- | --- |
| **Dates** | **Name of organization and position held** | **Responsibilities** |
|  |  |  |
|  |  |  |
|  |  |  |

**4. Social and political activities** *(\*Please indicate your membership and position)*

|  |  |
| --- | --- |
| Political party |  |
| NGO |  |
| Local self-government authorities |  |
| Other \_\_\_\_\_\_\_\_\_\_\_\_ |  |

**5. Your motivation for participating in the seminar.**

*Please provide detailed answers to the following questions.*

**1. Have you been recently elected to the regional or local authorities? If so, please indicate the dates and post.**

**2. Do you plan to participate in the next elections to regional or local authorities? For which post?**

**3. Which issues related to the development of local self-governance do you personally deal with within your community today? Which aspects of development of local self-government would you like to develop in the future?**

**4. Please indicate and briefly describe in your own words max 3-4 key challenges which slow down the development of local self-government in Ukraine (please do not quote any State documents and/or research/analytical papers):**

**5. Please share a few words on your expectations from this seminar.**