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| **SPECIAL APPLICATION FORM FOR WORKCAMP****DE-SCI-7.20 Trebnitz** **10.08.-24.08.2025** |

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| **Name:** |  |
| **Date of Birth:** |  |
| **Address:** |  |
| **E-Mail:** |  |
| **Mobile Number:** |  |
| **Sex:** |  |
| **Sending Organisation:** |  |

1. What is your profession (if student, state the subject)?
2. Do you have any experience with children? If so, please elaborate.
3. Did you participate in a workcamp before? What is your experience?
4. What is your motivation to take part in this workcamp?
5. What do you think you can contribute to the project as a participant?
6. What are your expectations about the workamp?

You will be working with minors. It is important, that everyone accepts the rules of safeguarding, our zero-tolerance approach to discrimination, sexual harassment and abuse in all working environments. We would like to draw attention, that you should place the safety and welfare of children and vulnerable people above all other considerations.

If your registration is successful, you will be sent a self-disclosure form which we ask you to sign and return.