**APPLICATION FORM**

**ESC - Volunteering**

Thank you for your interest in our project. We would like to understand better your motivation in taking part in this specific project. So please, read carefully the form, answer the questions (in English or Italian) and do not forget to ask your sending organization to send the form together with your CV with picture.

### 1. PLEASE FILL IN THE FOLLOWING DETAILS FOR YOUR APPLICATION!

### 1.1. Personal information

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| --- | --- | --- | --- |
| Name  |  | Surname |  |
| Email |  | Phone number with counry code | +\_\_ \_\_\_\_\_\_\_\_\_\_ |
| Address of Residence |  | Address number |  |
| City of residence |  | Zip code |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Gender  | Male/Female | Nationality |  |  |
| Date of birth |  | Place of birth  |  |  |
| Passport (ID) Number  |  | Solidarity Corps Number (PNR) |  |  |
| **Person to contact in case of emergency (Name, Address, Telephone and Email)** |  |
|  |  |
| **Name and email of your sending organization** |  |
|  |  |

#### 1.2. Special needs.

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| --- | --- | --- |
| Do you have any special needs (medical conditions, handicaps, etc.)?  | Yes \_\_ | No \_\_ |
| **Do you have any kind of allergy?**  | Yes \_\_ | No \_\_ |
| Do you need to take any kind of medicine? | Yes \_\_ | No \_\_ |
| **Is there any food you do not eat?** | Yes \_\_ | No \_\_ |

#### 1.3. Do you consider that in your life you face some of the following obstacles?

|  |  |  |
| --- | --- | --- |
| Disability/special needs (medical conditions, handicaps, etc.) | Yes \_\_ | No \_\_ |
| **Health problems** | Yes \_\_ | No \_\_ |
| Educational difficulties – e.g. learning difficulties, early school-leaver, poor school performance,  | Yes \_\_ | No \_\_ |
| **Cultural differences – e.g. immigrant, refuges or with immigrant or refugee family background, belonging to a national or ethnic minority** | Yes \_\_ | No \_\_ |
| **Economic obstacles – e.g. low standard of living, low income, dependence on social welfare system, long-term unemployment or poverty, debt or financial problems** | Yes \_\_ | No \_\_ |
| **Social obstacles – e.g. facing discrimination because of gender, ethnicity, religion, sexual orientation** | Yes \_\_ | No \_\_ |
| **Geographical obstacles – e.g. from remote or rural areas, youn people living in small islands or in peripheral regions, young people from urban problem zones, young people from less serviced areas (limited public transport, poor facilties).** | Yes \_\_ | No \_\_ |

#### 2.3. Please give further description if you have answered “YES” to any of the above questions. Per favore, daI una descrizione più dettagliata per i campi dove hai segnato “YES”.

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### 2. YOUR MOTIVATION

## 1.1. Description of the project.

**Please, describe, using your own words, how you imagine a typical day will be like in your receiving organization. Please state what organization you are interested in.**

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**2.2.Your motivation**

**Please describe below carefully your motivation for this specific project**.

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#### 2.3. Knowledge and skills you can share during your ESC experience.

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#### 2.4. Knowledge and skills you hope to gain during your ESC experience

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#### 2.5. Which challenges do you think you will encounter during your stay abroad?

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#### 2.6 Is there anything else you would like to tell? C'è qualcos'altro che vorresti aggiungere?

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| --- |
|  |

**PLEASE READ WITH ATTENTION THE SPECIFIC INFORMATION ABOUT THE ORGANIZATIONS AND THE GENERAL RULES OF ESC PROJECTS COORDINATES!**

If the project is approved, the volunteer will have to attend the online language course. At his/her arrival a test will be submitted to see wether the volunteer has attended the course or not. INTERNET AND MOBILE PHONE: volunteers need them, but neither the hosting organization nor InCo can afford to pay for it. So we can help volunteers at their arrival to find goods offers but they will have to pay for it. **HOSTING PEOPLE IN THE FLAT: it is forbidden to host people in the flat.** INSURANCE: You will have an insurance but you will have to anticipate the expenditures as foreseen by the programme and get reimbursed afterwards. Hosting organizations cannot anticipate the costs. Thanks you for filling in the appplication form! Please note that we can only accept your application if you attach your CV!

[ ]  **Read and accepted**

**Declaration**

**I declare that all of the information on this application form is honest and truthful to ability, experience and support needs and has been completed by the volunteer named on this application.**

[ ] Please tick here to show you understand and accept the above declaration

**Do not forget to send together with this form your CV with picture!**

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### INFORMATION FOR THE PROCESSING OF PERSONAL DATA

in accordance with and by the effects of EU Regulation 2016/679 (*hereafter "GDPR"*) relating to

protection of individuals with regard to the processing of personal data

Dear **volunteer**,

before you provide us with your personal data, in compliance with the legislation provided for by the European Data Protection Regulation n. 679/2016 and the Legislative Decree n. 196/2003, as modified by Legislative Decree n. 101/2018, whose goal is to protect the fundamental rights and freedoms of individuals, in particular the right to the protection of personal data, it is important that you read some information that can help you understand how your personal data will be processed and for which purposes, and what your rights are and how you can exercise them.

Subsequently, if everything is clear to you, you can freely decide whether to give your consent so that your personal data can be processed; you must know that this consent can be revoked by you at any time.

**1. Data controller**

The data controller is InCo Association – Molfetta APS and specifically the President pro tempore of the Association, with registered office in Molfetta, Piazza Municipio snc – angolo via Morte, CAP 70056, C.F. 93465040728.

Your personal data, which may be acquired at the time of the application for admission to the Association (through the registration or participation in specific activities, initiatives and projects carried out as part of the normal institutional activity of the Association) will be the subject of treatment in compliance with the aforementioned regulation.

**2. Object of the treatment and legal basis**

The Association will acquire, retain and treat:

* personal and identification data (for example: name, surname, fiscal code, address, date and place of birth, telephone, e-mail, bank and payment references).

The legal basis of the processing is your informed consent.

The Association may also acquire, retain and process:

* images, photos, videos, interviews and reports of events carried out during institutional, associative, recreational and promotional activities;
* particular categories of personal data (such as those relating to health) only with your free and explicit consent, expressed in writing at the bottom of this information document.

**3. Data provision**

Your data provision is optional. However, the partial or total failure to provide your data may result in the partial or total impossibility of implementing the membership with the Association and/or carrying out the proposed institutional activities and services.

**4. Purpose of the treatment**

The data will be processed for the following connected purposes:

* management of the membership;
* implementation, promotion and performance of institutional initiatives and activities;
* execution of institutional services;
* implementation of fundraisers and other forms of self-financing;
* dispatch of corporate communications and information material;
* fulfilment of administrative, accounting, tax and legal obligations.

**5. Processing methods**

Personal data may be processed both in paper and electronic form and with the aid of electronic or telematic systems or with any other means made available by technology, with the adoption of all modalities and security measures provided by law that are suitable to guarantee security, protection and confidentiality of data, as well as to minimize the risk of unauthorized treatment or non-compliant with the purposes indicated, destruction or loss of the data, unauthorized access, misuse and diffusion.

**6. Data retention period**

In compliance with the principles of lawfulness, purpose limitation, data minimization, retention limitation, the data will be kept for the time necessary to fulfill the aforementioned purposes, and, in any case, without prejudice to the obligations by law (for example: fiscal obligations, anti-money laundering obligations), the retention period is 10 year.

After this deadline, the data will be destroyed or made anonymous.

The interested party can however request, at any time, the cancellation of the data.

**7. Access to data**

Access to the data in question is allowed to the members of the Board of Directors, to the volunteers, to the technical staff and to the employees specifically appointed and duly trained, as well as to service companies, to consultants and to freelancers, expressly in charge of their treatment, in compliance with the legal provisions on data security.

**8. Data transfer**

The personal data processed by the Data Controller cannot be disclosed in favor of any unspecified third parties, in any possible form, including that of making the data available for viewing or consultation. On the other hand they can be communicated to subjects entitled to access to them by virtue of provisions of law, statutes, regulations, European regulations.

Personal data may also be communicated to subjects in charge of the institutional and operational activities of the Association itself, or to subjects with which the Association has entered into collaboration and/or convention relationships.

The data provided may also be communicated to public and/or private, national, EU and international bodies for participation in calls for tenders and/or projects, in the exercise of the functions of the law or for the reporting of affiliated or financed services.

These subjects will be expressly appointed as Data Processors.

In the treatments that will take place by third parties, only the execution of the operations strictly necessary for the pursuit of the purposes for which the treatment has been allowed is authorized.

The data will not be transferred outside the European Union. In any case, it is understood that the Data Controller, if necessary, will have the right to move the location of the servers in Italy and/or in the European Union and/or in non-EU countries. In this case, the Data Controller ensures from now on that the transfer of non-EU data will take place in compliance with the applicable legal provisions.

**9. Rights of the interested party**

As interested party, you can exercise the following rights:

a) right of access

b) right of rectification

c) right of cancellation

d) right of limitation of processing

e) right to data portability

f) right to object to the profiling of data and to unaware automated decisions

g) right of revocation

h) right to lodge a complaint with the Supervisory Authority.

**10. How to exercise the rights**

The rights referred to in point 9 of this information document may be exercised:

* by registered letter with return receipt which has to be sent to: Associazione InCo – Molfetta APS, whose headquarters are situated in Molfetta, Piazza Municipio snc – angolo via Morte
* by means of communication by e-mail to the following address info@incoweb.org

**11. Data breach, notification to the Guarantor and communication to the interested party**

In case of data breach (intended as accidental or unlawful destruction, loss, modification, unauthorized disclosure, or access to transmitted, stored or otherwise processed personal data), the Data Controller will notify the Privacy Guarantor in the manner prescribed by law.

**THE CONSENT IS COMPULSORY IN ORDER TO PROCEED WITH THE PROJECT**

[ ]  **AUTHORIZES AND GIVE CONSENT**

[ ]  **DOES NOT AUTHORIZE**

**PRIVACY – covid 19**

**As for the processing of personal data communicated to reveal health status, to be carried out in compliance with what is indicated in the aforementioned information, and in particular the processing of data related to the swab for Covid-19**

**THE CONSENT IS COMPULSORY IN ORDER TO PROCEED WITH THE PROJECT**

[ ]  **AUTHORIZES AND GIVE CONSENT**

[ ]  **DOES NOT AUTHORIZE**