**Amsterdam-Athens Capacity Building Programme for Initiatives Supporting Refugees**

**Application Form**

*This application form should be completed in full* ***in English*** *and submitted electronically to* eleni.karakitsiou@bodossaki.gr *by* ***17.00, Thursday 9 November 2017.***

*For any enquiries please contact Eleni Karakitsiou (Program Officer, Bodossaki Foundation) at 210 7259307*

**1. Name of the organisation/group in English**

|  |
| --- |
|  |

**2. Name of the organisation/group in Greek**

|  |
| --- |
|  |

**3. Website address and/ or Facebook page of organisation/group**

|  |
| --- |
|  |

**4. Address of the organisation (headquarters)**

|  |
| --- |
|  |

**5. Form of organisation/group (mark with x)**

|  |  |
| --- | --- |
| Association (Σωματείο) |  |
| Non-profit company (A.M.K.E.) |  |
| Foundation (Ίδρυμα) |  |
| Social Cooperative Enterprise (Κοιν.Σ.Επ.) |  |
| Other (specify) |  |
| Informal group |  |

**6. Names and contact details of applicant participants**

*1 or 2 individuals from the same organization/group can apply to participate in the project.* ***All*** *of the specified participants must be available for the full duration of the training (24-26 November 2017, 10.00- 18.00).*

**Applicant 1:**

|  |  |
| --- | --- |
| **Name** |  |
| **Position in organisation/group** |  |
| **E-mail** |  |
| **Mobile** |  |
| **English language qualification (specify)** |  |

**Applicant 2 (if applicable):**

|  |  |
| --- | --- |
| **Name** |  |
| **Position in organisation/group** |  |
| **E-mail** |  |
| **Mobile** |  |
| **English language qualification (specify)** |  |

**7. Describe how your organization/group is currently working to meet the needs of refugees in Greece and what has been the impact these activities (maximum 200 words).**

|  |
| --- |
|  |

**8. Explain why the activities of your organization/group are innovative (100 words).**

|  |
| --- |
|  |

**9. Describe how you plan to use the knowledge gained from your participation in the training to benefit your organization/group (maximum 200 words).**

|  |
| --- |
|  |

**The Bodossaki Foundation has the right to request from the selected participants any additional relevant documentation to confirm the accuracy of the information provided in the application.**