APPLICATION FORM

**LEARNING ROUTE**

“Rural Employment and Self-Employment Initiatives and Opportunities”

This Learning Route is part of the implementation of the FAO/IFAD Project “Strengthening Decent Rural Employment Opportunities for Young Women and Men in the Caribbean”.

This Call for Applications is addressed to young men and women from rural organizations, associations, institutions and projects interested in learning, adapting and implementing solutions and ideas that can contribute to improve rural youth employment situation and develop entrepreneurial opportunities in rural territories. Young men and women participants must fulfil the following profile:

* A representative from a rural association, organization, cooperative, institution, project, or similar, that is already undertaking actions to improve youths’ employment situation though a concrete and specific productive activity.
* A young leader with influence on decision-making in their organization with significant representation of young people. Their organization must be linked and connected to other institutions and projects.
* A leader of an organization, who is interested and committed in supporting the design and implementation of concrete actions after the Learning Route. Participants will commit to disseminate and apply lessons learned after the Learning Route.

“Rural Employment and Self-Employment Initiatives and Opportunities” Learning Route will take place in Guyana from February 14th to February 21st, starting in the city of Georgetown.

**Deadline to send the Application Form is January 15th 2017.**

**APPLICATION FORM**

**(One per participant)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **LAST NAME** | | | | **FIRST NAME** | **MIDDLE NAME** |
|  | | | |  |  |
| **GENDER** | | | | **Project or institution endorsing your participation** | |
| **Woman** | **Men** | | |  | |
|  |  | | |
|  | | | | | |
| **ETHNICITY** | |  | | | |
| **LOCATION (SPECIFIC ADDRESS, REGION)** | |  | | | |
| **EMAIL** | |  | | | |
| **TELEPHONE NUMBER (Please provide more than one)** | |  | | | |
| **DATE OF BIRTH** | | |  | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **EDUCATION (Mark with an X)** | | | | | | |
| **Level** | | | **Complete** | | **Incomplete** | |
| Primary | | |  | |  | |
| Secondary | | |  | |  | |
| Technical | | |  | |  | |
| University | | |  | |  | |
| Post-university | | |  | |  | |
| Other | | |  | |  | |
| **CURRENT ACTIVITY** | |  | | | | |
| **SPECIALTY** | |  | | | | |
| **Access to internet** | | | | | | | |
| **Do you have access to internet?** | | | | **Do you use social networks?** | | | |
| Yes \_\_\_ No \_\_\_\_\_ | | | | Yes \_\_\_ No\_\_\_\_ | | | |
| **Where/How?** |  | | | Whatsapp | |  | |
| Computer |  | | | Facebook | |  | |
| Mobile phone |  | | | Twitter | |  | |
| Other |  | | | Other | |  | |
| Which | | | | Which | | | |
|  | | | | Please provide contact information | | | |

|  |  |
| --- | --- |
| **Are you vegetarian?** |  |
| **Do you have any food allergies ? Please indicate** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of the organization** | | | | | | |
|  | | | | | | |
| **Contact information** | | | | | | |
| **Full address** |  | | | | | |
| **Name of the representative of the organization** |  | | | | | |
| **Email** |  | | | | | |
| **Telephone**  **(Please provide more than one)** |  | | | | | |
| **Type of organization (Association, cooperative, institution, etc.)** | | | | | | |
|  | | | | | | |
| **Are you legally established** | | | | | | **Yes\_\_\_**  **No\_\_\_\_** |
| **Since when?** | | |  | | | |
| **Main objective and activities of the organization** | | | | | | |
|  | | | | | | |
| **What role do you have in the organization?** | | | | | | |
|  | | | | | | |
| **Networks** | | | | | | |
| **Is your organization linked with other institutions, groups, networks?** | | | | | **Yes\_\_\_\_**  **No\_\_\_\_\_\_** | |
| **Which one(s)** | | | | | | |
| **PRODUCTIVE ACTIVITY THAT THE ORGANZATION IS CURRENTLY DEVELOPING** | | | | | | |
| **Describe what your organization does** | | | | | | |
| **Describe the specific productive activity or products your organization develops** | |  | | | | |
| **Additional contact information** | |  | | | | |
| **Number and ages of people that participate** | | N° of people younger than 18:  N° of people between 18 and 35:  N° of people over 36: | | | | |
| **Number of women and men in your organization** | | **Men** | | **Women** | | |
| **Number of direct or indirect employment the organization generates** | |  | | | | |
| **Date that the organization began its activities** | |  | | | | |
| **Current support received** | |  | | | | |
| **Main strengths and achievements** | |  | | | | |
| **What do you think you must improve to generate more employment opportunities for young men and women through your organization?** | |  | | | | |
| **Challenges you face** | |  | | | | |

MANY THANKS!

We will contact you very soon!