**EUROPEAN NETWORK OF YOUTH & VOLUNTEERING – ENYV**

Last name:

First name:

Birth date: (dd/mm/aa) Gender: Citizenship:

email:

Telephone, other social media & networks:

**Please choose a maximum of five categories with which you feel most identified:**

□ I am between 18-30 years old

□ I am a professional of education

□ I represent an Association and/or a Public Institution

□ I am a foreign person

□ I am a member of one or several associations of the civil society: NGO, sports or religious associations, other

□ I participate and/or I have participated as a volunteer in an association, NGO and/or in a Volunteering Program

□ I am interested in youth and volunteering issues

**Please indicate how would you like to participate at the ENYV Network:**

□ Participating with professionals who work in education with youngsters

□ Sharing good practices that I/we have developed and have been successful

□ Learning good practices that have been developed in other contexts

□ Motivating young people towards participating in associations and in activities organized by the civil society

□ Sharing my knowledge and experiences of volunteering with other people

□ Learning more about volunteering

□ Developing initiatives for volunteering programs

□ Participating in workshops and volunteering programs

□ Participating in cooperative and collaborative activities

This information you have given us is confidential (Organic Law 15/1999 on the Protection of Personal Data) and will be used only anonymously to define collaboratively the strategies and activities of the European Network of Youth & Volunteering – ENYV

[**www.juvivol.eu**](http://www.juvivol.eu) **jucivol.eu@gmail.com**