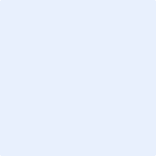
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*Insert ID photo*

**REACT 2021**

**REGISTRATION FORM**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **First Name** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Last Name** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Email address** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Telephone number** |  | | | | | | **Cell phone** |  | | |
| **Sex** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Date of birth** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Place of birth** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Nationality** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Would you need to apply for a Schengen Visa to take part of the course? If so, which is your Spanish consulate/embassy of reference?** | | | | | | | | | | |
|  | | | | | | | | | | |
| **ID/Passport number** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Marital status** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Permanent address** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Zip code** | | |  | | | | | | **City** |  |
| **State** | | |  | | | | | | **Country** |  |
| **Contact in case of emergency** | | | | | | | | | | |
| **Full Name** | |  | | | | | | | | |
| **Relationship** | |  | | | | | | | | |
| **Contact number** | |  | | | | | | | | |
| **Special medical conditions, if any** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Allergies / food restrictions:** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Languages** | | | | | | | | | | |
|  | | | | | | **Basic Advanced Proficient** | | | | |
|  | | | | | | **Basic Advanced Proficient** | | | | |
|  | | | | | | **Basic Advanced Proficient** | | | | |
| **Educational Background** | | | | | | | | | | |
| **Degree** | | | |  | | | | | | |
| **Degree** | | | |  | | | | | | |
| **Degree** | | | |  | | | | | | |
| **Professional Information** | | | | | | | | | | |
| **Areas of Expertise** | | | | |  | | | | | |
| **Current job** | | | | |  | | | | | |
| **Institution** | | | | |  | | | | | |
| **Scholarships** | | | | | | | | | | |
| **If you are applying for financial support, please, elaborate on your need and motivation:** | | | | | | | | | | |
| **What is you annual income in US$?** | | | | | | | | |  | |
| **Are you employed?** | | | | | | | | |  | |
| **In case of unemployment, since when are you unemployed?** | | | | | | | | |  | |
| **Do you have any dependants?** | | | | | | | | |  | |
| **Are you based in Madrid?** | | | | | | | | |  | |
| **In case you are selected to participate in REACT 2021, will you have to cover for your own accommodation in Madrid?** | | | | | | | | |  | |
| **How did you find out about this course?** | | | | | | | | | | |
|  | | | | | | | | | | |
| **Additional comments** | | | | | | | | | | |
|  | | | | | | | | | | |

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| **ADDITIONAL DOCUMENTS REQUESTED, check list** |

|  |  |
| --- | --- |
| Letter of motivation |  |
| Resume or CV |  |
| Recent passport size photo (digital) |  |
| Copy of academic transcripts |  |
| Two letters of recommendation on headed paper. They should include the date and stamp/signature of the entity/person that is writing the letter**. The ORIGINALS MUST be sent by post.** Letters may be advanced via email, however, originals are still required. |  |
| English language certificate. If you don’t have one, contact us and we will schedule a brief phone interview. |  |
| In case you apply for a partial scholarship, proof of your annual income together with an official translation into English or Spanish. This is absolutely mandatory. |  |

**Candidates who would like to apply for the course should send this registration form, together with the above-mentioned documents, to** [iucpm@helsinkiespana.org](mailto:iucpm@helsinkiespana.org)

Deadline for applications:

* Participants in need of Schengen visa - March 15, 2021
* Europeans and visa holders – May 3, 2021

**Incomplete applications will NOT be considered.**

Non-selected applicants from previous editions need to reapply for the current edition in order to be considered.

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**Contact information:** [iucpm@helsinkiespana.org](mailto:iucpm@helsinkiespana.org) Tel: **+34 91 533 54 55**

I agree and acknowledge that by applying to REACT programme, all personal information contained in this registration form will be stored and used by Helsinki España´s staff for the purposes of selection, evaluation, coordination and information for donors and visa authorities. I understand that this information is stored in a safe manner in accordance with the General Data Protection Regulation (GDPR) of the European Union