



# European Solidarity Corps volunteering application

## 1. Host organisation

Name of the organisation you are applying to\*

When could you start? (e.g. 1 Sept 2024)

For how long could you volunteer? (e.g. 12 months)


\*You can check the name at <https://maailmanvaihto.fi/en/volunteer-in-finland/esc-available-projects/>

## 2. Sending (supporting) organisation\*

**\*Please note that you must have a sending organisation.** If you need search for a sending organisation, please see the list of organisations at [https://youth.europa.eu/volunteering/organisations\\_en](https://youth.europa.eu/volunteering/organisations_en).

Name of the organisation

SAGLAM DUSUNCE GENCLER  
TESKILATI ICTIMAI BIRLIYI (Common  
Sense Youth Organisation)

OID number

E10200624

Contact person's name

Ramiz Aliyev

Contact person's e-mail address

evs@csyo-az.org

Contact person's phone number

+994558237290

## 3. Personal information

### Your personal information

Surname

First name(s)

Date of birth

Place of birth


Add your  
photo here.



Nationality

Gender (female / male / other /  
prefer not to say)

Street address

Postcode and city

Country

Phone number

E-mail address

PRN\*

*\*You will get the European Solidarity Corps Participant Reference Number (PRN) after registering for the European Solidarity Corps. Please, register here: [https://europa.eu/youth/solidarity\\_en](https://europa.eu/youth/solidarity_en)*

Please describe shortly your personality including your strengths and weaknesses.

#### Person to contact in case of emergency

First name(s), surname

Street address, postcode, city,  
country

Phone number

E-mail address

☐ By ticking the box, I assure that the person mentioned as my emergency contact is informed about the status and agrees to share the contact details with Maailmanvaihto and the hosting community according to



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[MaaIlmanvaihto's privacy policy](#)

[\(https://maailmanvaihto.fi/en/privacy-policy-documents-of-incoming-volunteers/\)](https://maailmanvaihto.fi/en/privacy-policy-documents-of-incoming-volunteers/) (required).



## 4. Education and language skills

### Studies

School/College/University	Field of study (if applicable)	Years (e.g. 2020–2023)

Other trainings/courses:

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### Language skills

Language	Native	Fluent	Good	Fair	Basic
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Were you able to write this application in English yourself?

- ☐ Yes, I managed to write this application myself.
- ☐ No, I needed some help in writing this application.



## 5. Previous experience and current situation

Please describe your work experience (including duration and tasks).

Do you have previous local or international volunteer experience? Please, describe.

Do you have other international experiences? Please describe them.  
(For example, camps, conferences, or exchange studies, including their length.)

Your current situation

- ☐ working
- ☐ unemployed
- ☐ studying
- ☐ other

Details of your situation:

*(Where do you work? Do you have a permanent/temporary/part-time job? How long have you been unemployed? What and where do you study?)*

What are your future plans?



Do you have less opportunities than other young people? If yes, please tick the boxes which describe your situation

*The European Solidarity Corps aims at promoting social inclusion. When selecting volunteers, we will give priority to applicants with fewer opportunities.*

- ☐ cultural differences (e.g. migrant, asylum seeker, refugee)
- ☐ economic difficulties (e.g. unemployment or low income)
- ☐ disability or health problems (e.g. physical or sensory impairment)
- ☐ social or educational challenges (e.g. learning difficulties or early school-leaving)
- ☐ geographical obstacles (e.g. rural or remote location)
- ☐ challenges linked to discrimination (e.g. linked to gender, sexual orientation, religion)
- ☐ other

If you ticked any of the boxes, please give more information on your situation.

## 6. Motivation and host organisation related information

Why would you like to volunteer in the European Solidarity Corps? How would you benefit from the experience?

Why would you like to volunteer in Finland?



Why would you like to volunteer in this particular host organisation? Please describe your motivation.

Please tell about your hobbies, special skills, and interests that could be of use during volunteering.

What kind of challenges do you expect to face during your volunteer period in Finland?

We would like to make sure that you are aware of the practical arrangements in the host organisation you are applying to. Please, choose the correct option:

The host organisation I am applying to is situated in

- ☐ a city/town  
☐ the countryside

Please tell about your motivation to live in the location of your project:



In the host organisation I am applying to, the accommodation is arranged in

- ☐ a host family  
☐ the work placement  
☐ a shared flat for volunteers

Please, tell about your motivation to live in this kind of accommodation:

If the accommodation is a shared flat, are you okay sharing the flat with an opposite gender volunteer?

- ☐ Yes  
☐ No

To make sure that we are able to provide you with the conditions and support you need,

	Yes	No
Do you have allergies (food, animal hair, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
Do you follow a special diet?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any physical health issues?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have mental health issues (depression, for example)?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have disabilities?	<input type="checkbox"/>	<input type="checkbox"/>
Do you smoke?	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please give further details. If applicable, please also describe support you would need during your volunteering activity.

*Your answer will help MaaIlmanvaihto and the host organisation to consider if they could provide you the support you would need during your volunteering period.*





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How did you hear about Maailmanvaihto – ICYE Finland?

### Data Privacy Disclaimer

☐ I give my permission for Maailmanvaihto to handle the information given in this form according to [Maailmanvaihto's privacy policy](https://maailmanvaihto.fi/en/privacy-policy-documents-of-incoming-volunteers/) (<https://maailmanvaihto.fi/en/privacy-policy-documents-of-incoming-volunteers/>) which I have read through (required).

☐ I give my permission to share the information that I have given in this form with the host organisation that I am applying to as well as with potential host families in case the project involves host family living (required).

☐ I assure that the information given in the form is truthful and given by the candidate named in this application (required).

Please email the filled-in application to Maailmanvaihto to the address: [esc@maailmanvaihto.fi](mailto:esc@maailmanvaihto.fi). Thank you!