

EU Project: Towards Inclusive Universities; by empowering disabled students

**Training Empowerment
Application Form**

May/June 2009, Ankara, Turkey



European Union

Personal Details	
Full name (as written in passport)	
Address	
Postal code	
City	
Country	
Passport/id.card number	
Expiry date passport/id.card number (document must minimally be valid for 3 months after returning to The Netherlands)	
Telephone number	
Mobile phone number	
E-mail address	
Date of birth	
Disability (optional)	
Education Details	
Institute for Higher Education	
Area of Study	
Current College Year	

Special Needs	
Please indicate if you have any special needs to make your participation pleasant and successful (e.g. assistance with general daily activities, accessibility issues, sign language interpreter, requirements for written material etc). Please specify.	
Diet (e.g vegetarian, food allergy, diabetes)	
Emergency contact:	
Name	
Relation	
Address	
Postal code	
City	
Telephone number	
Mobile phone	