

Confirmation of participation in an activity

Receiving organisation			
EU-project number			
Title of the activity			
Name of the receiving organisation			
PIC			
Venue of the activity			
Participant			
Surname			
First name			
European Solidarity Corps reference number			
Country of residence			
e-mail address			
Date of arrival		Date of departure	
Activity start date		Activity end date	
Sending Organisation			
Name of the sending organisation			
PIC			
Support			
Financial support travel fees	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a	Participation "Ech?!-Fräiwëlleg?!"	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a
Monthly food allowance paid/received	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a	Participation predeparture training	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a
Monthly pocket money paid/received	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a	Participation on-arrival training	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a
Free accommodation provided	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a	Participation mid-term evaluation	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a
Free public transport	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a	Participation "MeetingPoint"	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a
Participation language course	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a	Participation "back home" Meeting	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> n/a

Monthly amounts paid/received ¹		
Month	Food allowance (€)	Pocket money (€)
Total amount paid/received		

Signature & stamp
of the receiving organisation
(legal responsible)

Participant's Signature

¹ Please indicate the monthly amount in € - add in brackets the amount in the national currency, if applicable