

Project: Inclusion of Ethnic Minority Women in the Labor Market



Application for the training program

i. General information		
Name and surname		
Birth year		
Ethnicity		
Address		
City		
Contact telephone		
Email		
Level of education		
Do you currently have your own business?	□ YES □ NO	
Do you have a business idea?	□ YES □ NO	
II. Education		
Part 2. Education and qualifications		
No education		
Finished primary school		
Finished primary school Crafts High school Colleague		
Finished primary school		
Finished primary school		
Finished primary school Crafts High school Colleague Faculty Other: III. Skills Qualifications (licensees, certificates, per		
Finished primary school		
Finished primary school		
Finished primary school		









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What other abilities and skills do you posses?	
1	
2	
3	
4	
5	
IV. Please indicate for which training you are interested (please circle):	
I. Learning languages (English and German);	
II. General life skills: communication and soft skills;	
III. Career counseling;	
IV. Basics for business development and self-employment;	
V. Other subjects	
If you've chosen V. Other subjects, please indicate concrete details:	
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Place:	Signature
Date:	



