APPLICATION FORM

ESOT NON-FINANCIAL ENDORSEMENT
OF EVENTS ORGANISED BY THIRD PARTIES

Full name of the learning activity:

____________________________________________________________________________

Dates and venue of the learning activity:

____________________________________________________________________________

Important deadlines of the learning activity (abstract submission, early registration fees, etc.):

____________________________________________________________________________

Learning activity description (max. 250 words):

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____________________________________________________________________________

Official website and social media information (i.e. Twitter account, Facebook page, main hashtags, etc.):

____________________________________________________________________________

Clear definition of intended audience:

____________________________________________________________________________

Learning objectives, expected outcomes and description of how the learning activity develops the participants:

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Justification for length of programme and mode of delivery:

____________________________________________________________________________
Evidence of provision of post-course reflection activity:

_______________________________________________________________

Description of how the learning activity is evaluated:

_______________________________________________________________

List of any partnership arrangements:

_______________________________________________________________

_______________________________________________________________

Please provide the ESOT Office with the following documents attached to this application:

- copy of the programme, module descriptor or other relevant supporting evidence
- evidence of peer review and/or collaboration with an appropriate professional
- CVs of relevant staff associated documentation (budget, project plan, etc.)
- banner of the event (.png format 1200x630).

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CONTACT PERSON & COMPANY INFORMATION

Name of the company: ____________________________________________

First name and Last name of the contact person: ____________________

Full postal address: _____________________________________________

Post code: __________ Country: __________________

Phone: ___________ E-mail: __________________

Invoice details: _______________________________________________

We hereby apply for the endorsement to the above mentioned learning activity. We have read the indicated guidelines and we are in agreement.

Signature____________________________________________________

Please, return this form to Denise De Salvo - denise.desalvo@esot.org