**TCA Study Visit**

**“INCLUSION WITHIN KA2”**

**Warsaw, Poland, 7-10 November 2017**

**Registration form**

|  |  |
| --- | --- |
| **Participant name** |  |
| **Position and area(s) of responsibility within the organisation** |  |
| **Participant’s knowledge of English****(B2 level required)** |  |
| **Participant e-mail** |  |
| **Participant phone number** |  |
| **Organisation name** |  |
| **Type of organisation**  |  |
| **Organisation address** |  |
| **Postal code** |  |
| **Country** |  |
| **Phone number** |  |
| **Organisation e-mail** |  |
| **Legal representative of the organisation** | **Name****position** |
| **Sector VET or HE?** |  |
| **experience of your organisation in education programs** |  |
| **The needs of your organization in the context of inclusion** |  |
| **Project ideas (if yes, please describe)** |  |
| **What kind of project partner are you looking fo (sector, type, group etc)?**  |  |