**Application Form**

For the delivery of the Transnational Training-of-Trainers (ToT) Workshop

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| **Personal Information** | |
| **Title** |  |
| **Name & Surname** |  |
| **Country** |  |
| **Email address** |  |
| **Phone number** |  |

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| **Requirements for trainers** | | | | |
| **Very good understanding of the work of enforcement agents, including knowledge of the enforcement legal framework and procedures** | Yes | | No | |
| **Good understanding of data protection** | Yes | | No | |
| **Experience in designing and delivering training and developing training materials on data protection or data protection in civil enforcement** | Yes | | No | |
| **Practical experience in working as an enforcement agent or in enforcement agents office or agency, as Data Protection Officer, in data protection authorities** | Yes | | No | |
| **Command of English** | Good | Very good | | Excellent |

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| **Declarations** | |
| **I confirm my availability for delivering the ToT on the requested dates** |  |
| **I consent to provide the requested services for the proposed reimbursement** |  |

**Date: …./…./…….**

**Signature**