



EVS ACCREDITATION ANNEX

PIC of the applicant organization:

COORDINATING EXTERNAL RECEIVING PLACE(S)

How many volunteers does your organization intend to coordinate at external receiving place(s)?

Place:

Date (dd-mm-yyyy):

Name of the applicant organisation:

Name of legal representative:

Signature:

National ID number of the signing person (if requested by the National Agency):

Stamp of the applicant organisation (if applicable):