International Course

on River and Wetland Restoration

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| 1. **Personal Data** | | | | |
| Full Name:  *(underline family name)* |  | | | |
| Contact Address: |  | | | |
| Country: |  | | | |
| If visa to the CZ required:  Permanent Residence:  Passport Number |  | |  | |
| Date of Birth: |  | | Sex: | |
| Nationality: |  | | | |
| **Employment** | | | | |
| Organization: |  | | | |
| Address: |  | | | |
| Telephone: |  | | | |
| Fax: |  | | | |
| **E-mail:** |  | | | |
| Position: |  | | | |
| Description  of your work: |  | | | |
| **Education** | | | | |
| Name and place of college/university: |  | | | |
| Main fields of study: |  | | | |
| Degree: |  | | | |
| **Why do you wish to attend the course?** | | | | |
| **Please, describe your experience with wetland restoration and what are your main field(s) of interest in this area:** | | | | |
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| **English Proficiency (moderate, good, fluent)** | | | | |
| read: | | speak: | | understand: |
| 1. **How did you get to know about the course?** | | | | |
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| 1. **What do you expect from the course?** | | | | |
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| 1. **Do you have any food allergies or intolerances? If so, please specify, it will help us order the right food for you.** | | | | |
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| 1. **Do you prefer accommodation in a single room or is it possible to have a double room (price saving)?** | | | | |
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| 1. **Finances:**   Board, refreshments, field trips during the course will be covered by the Ministry of the Environment of the Czech Republic.  The participants are responsible to cover their travel expenses (to the Czech Republic and back) and accommodation (350.- EUR). Accommodation will be arranged and booked by the organisers). | | | | |
| 1. **Application to be sent before: 1th August 2025**   by e-mail to**:** [**libuse.vlasakova@mzp.gov.cz**](mailto:libuse.vlasakova@mzp.gov.cz) | | | | |