



THE INTERNATIONAL
YOUTH INITIATIVE PROGRAM

Apply for YIP

Welcome to the YIP 12 2019-2020 application. Please fill in your information below :

* Required

1. First Name *

2. Last Name *

3. Birth Date *

You have to be between 18 - 28 years old to be able to apply to YIP.

Example: December 15, 2012

4. Marital status *

Mark only one oval.

Single

Married

5. Gender *

Mark only one oval.

Female

Male

Other

6. Nationality *

Please use the nationality with which you apply. If you are applying from a stateless region or will use multiple passports during your time at YIP, please let us know more about this in your reply. We ask so we can ensure you are eligible to be with us during our time in Sweden, the outpost, and the internships.

7. **How did you hear about YIP? ***

Contact Information

Please fill in your contact information where we can reach you between now and the beginning of YIP.

8. **Email (IMPORTANT: Make sure you type your email correctly because we will be use this for our communications with you!) ***

9. **Email (Other)**

10. **Phone (Primary) ***

Please remember the country code, e.g.: +1 for USA/Canada, or +46 for Sweden.

11. **Phone (Other)**

Please remember the country code, e.g.: +1 for USA/Canada, or +46 for Sweden.

12. **Website**

Here you can enter your Personal Website, Blog, Facebook or Twitter.

13. **Skype username**

Residential Address

Please enter the address where you currently live. If you are traveling, enter the address where you are registered.

14. **Street Address 1 ***



15. **Street Address 2**

16. **City ***

17. **Postal Code ***

18. **Country ***

19. **State / Province**

Correspondence Address (if different)

If you would like to receive any YIP related post at a different address than your Residential Address, please enter a Correspondence Address.

20. **Street Address 1**

21. **Street Address 2**

22. **City**

23. **Postal Code**

24. **Country**

25. **State / Province**

Emergency Contact Information

In case of emergency during YIP, who should we contact?

26. **Full Name ***



27. **Relationship ***

Mark only one oval.

- Parent
- Sibling
- Spouse
- Friend
- Other (please specify below)

28. **Other**

29. **Street Address 1 ***

30. **Street Address 2**

31. **City ***

32. **Postal Code ***

33. **Country ***

34. **State / Province**

35. **Phone (Day) ***

Please remember the country code, e.g.: +1 for USA/Canada, or +46 for Sweden.

36. **Phone (Night) ***

Please remember the country code, e.g.: +1 for USA/Canada, or +46 for Sweden.

37. **Email ***



38. If your contact does NOT speak English, what language does he/she/they speak?

Food

39. Diet: I eat *

Check all that apply.

- (organic) meat if provided
- Vegetarian
- Vegan
- Lactose-free
- Gluten-free

40. If you have any food allergies please describe below: *

If you don't have any food allergy; write "No".

Terms & Conditions and Privacy Policy

41. Please read and accept the YIP Privacy Policy <http://yip.se/privacy-policy/> *

Check all that apply.

- I accept the YIP Privacy Policy

42. Please read and accept the YIP Terms and Conditions http://yip.se/application/terms_and_conditions/ *

Check all that apply.

- I accept the YIP Terms and Conditions

Comments

That's all for now! This concludes the personal information form of our application. As soon as you submit the form, you will get an email with further instructions. THIS FORM IS NOT THE FULL APPLICATION FOR YIP. You will be sent the application by email once you have completed this form.



43. Feel free to leave a comment or ask a question...

