|  |
| --- |
| Note:A human rights defender is a person who, individually or with others, acts to promote or protect human rights, including civil, political, economic, social and cultural rights. These are people who work for democratic transformation to propagate the right to participate in decision-making, the right to freedom of assembly and association, etc. Human rights defenders can include judges, lawyers, journalists, bloggers, human rights monitors, agents/peace builders in conflict zones, etc. Very important: The definition of a human rights defender does not include individuals or groups who commit or propagate violence. Therefore, there is no need to fill out this form if you defend human rights through violence. |

1. **PERSONAL BACKGROUND**
	1. **Personal data**

|  |  |
| --- | --- |
| Academic Title(s): |  |
| First Name(s): |  |
| Last Name: |  |
| Date of Birth: |  |
| Place of Birth: |  |
| Gender: |  |
| Citizenship(s): |  |
| Passport: | Passport number: Date of Issuance : *select date*Expiry date : *select date*  |
| E-mail |  |
| Telephone numbers |  |
| Current location:*Where are you* *currently based?* | Country : …………………………………………………………………….. City/Place: ………………………………………………………………..……  |
| Are you currently located in your country of origin? | [x] yes [ ] noIf ‘no’, please indicate your visa status in your current place of residence:Status : ……………………………………………………………Date of Issuance: *select date*Expiry date : *select date* |
| Accompanying spouse of Human Rights Defender |
| Title |       |
| First and last name |       |
| Telephone  |       |
| Email |       |
| Accompanying children |
| First and last name |       | Gender : |
| First and last name |       | Gender : |
| First and last name |       | Gender : |
| … |  |

* 1. **Emergency Contact**

Please ensure that your emergency contacts agree to disclose their personal data

|  |  |
| --- | --- |
| Title  | Select an item.  |
| Academic title |  |
| First name |  |
| Surname |  |
| Country of residence |  |
| E-mail |  |
| Telephone number(s) |  |
| Language(s) of communication |  |
| What is your relationship with the person? |  |

**1.3. Language skills**

Which languages do you speak? Please rate each level of communication.

|  |  |
| --- | --- |
| **Language** | **Level** |
| French | Select an item. |
| English | Select an item. |
| Kiswahili | Select an item. |

**2. PROFESSIONAL BACKGROUND**

**2.1. Education**

Please describe your professional and/or academic background. If you have any degrees (e.g. university or college), please list.

|  |
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|  |

* 1. **Your work**

Please state the domain you work in.

|  |
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* 1. **Professional achievements**

Please describe the most important successes in your commitment for human rights.

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**2.4 Further information and links**

Is there anything else you would like to let us know? Please use this field to list links regarding your activities of human rights defenders.

|  |
| --- |
| Please click here to write. |

**3. EXISTING RISKS**

# 3.1. Description of the security situation

Please describe current risks you are facing related to your human rights work. Please list specific incidents with respective dates.

|  |
| --- |
|  |

# 3.2. References to the security situation

# Please attach references to your personal statement supporting your security concerns (e.g. articles, documentation, links):

|  |
| --- |
| Please click here to write. |

# 3.3. Awareness raising

Is it possible for you to appear publicly during your relocation as part of AHRN's activities? Please also consider your security-related implications.

Note: Public relation activities before, during and after the relocation will only take place with your consent.

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# 3.4. Special support

# Do you require special support due to health problems, disabilities or for other reasons?

|  |
| --- |
|  |

# 3.5. *Referees*

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Position** | **Institution** | **Contact** |
|  |  |  | E-mail: Telephone: Skype:Language(s) of communication:  |
|  |  |  | E-mail: Telephone: Skype:Language(s) of communication:  |

**4. OTHER**

**4.1. Expectations**

What are your expectations of this scholarship on a personal and/or artistic level? How could you benefit from it?

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|  |

**4.2. Support**

What kind of support measures would help you during the programme (e.g. psychosocial support, security training), and why?

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|  |

# 4.3. Following the scholarship

When planning your return, which concrete measures could help you to resume / continue your work in your home country?

|  |
| --- |
|  |

**5. FURTHER INFORMATION**

**5.1. Relatives**

Are you accompanied by family members (only spouse, children under 18)? If so, please provide their names and dates of birth.

|  |
| --- |
| Please click here to write. |

**5.2. Contact with other funding programmes**

Have you been in contact with other support programs? If so, which organisations have you been in contact with?

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| --- |
|  |

**5.3. Further information**

Is there anything else you would like to inform us about?

|  |
| --- |
| Please click here to write. |

**Do you confirm that all the information you provide in this form is true?**

[ ] yes [ ] no