

Date and place:

Emergency contact information:

FIJET ACADEMY FOR YOUNG JOURNALISTS

Signature:

APPLICATION FORM

1. Personal d	etails					
Mr./Mrs./Ms.	Surname:	Surname: Middle N		Name:		
Date and Place o	f Birth:					
Home Address:						
Country:		Nationality:				
Passport No.:		Issued by:		Valid until:		
Private telephone	e/mobile telepho	one:				
Professional tele	phone/mobile te	elephone:				
E-mail:						
Professional acti	vity /Media and	address:				
If you are a freel	ancer, for which	media do you work:				
Name of the FIJI	ET national asso	ociation of the applicant	i :			
Mother tongue:	ngue: Other languages:					
Size of T-shirt:	S M	L XL XX	L			
2. Accommod	lation					
ingle room Double room						
3. Travel Arr	angements					
Arrival by	plane	car	train			
Date and time:		Flight number:		From:		
	known yet, sen	d the arrival details via	e-mail or f	ax as soon as you get it)		
Departure by	plane	car		train		
Date and time:	TC . 1	Flight number:	1	To:		
		yet, send the arrival de	tails via e-	mail as soon as you get it)		
4. Entry VIS		100				
I do NOT need e	ntry visa:	I DO need entry visa	1:	I need an invitation let	ter:	
national FIJE ⁷ By signing this	Γassociations sapplication f	. Travel costs will b	e covered	FIJET World and half by participants or thei to publish at least one a	r employer.	