



International Catholic Movement for Intellectual and Cultural Affairs
 Mouvement International des Intellectuels Catholiques
 Movimiento Internacional de Intelectuales Católicos
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Pax Romana Human Rights Internship Program 2008
APPLICATION FORM

Geneva, 30 May – 16 June 2008

1. PERSONAL INFORMATION

Family Name	
First Name	
Sex : Male / Female	
Date and Place of Birth	
Nationality	
Passport Number	
Date of Issue	
Date of Expiry	
Have you been to Switzerland before?	
Do you need a visa for Switzerland?	
If yes, what are the nearest relevant Swiss Embassies' fax number and address? Please include the area code	
Profession	
Place of work/study	
Professional/university address	
Telephone / Fax	
Email	
Permanent Mailing Address	

2. LANGUAGE

Please write down your language proficiency: E (excellent), G (good), F (fair), N (no knowledge)

Language	Speaking	Reading	Writing
English			
French			
Spanish			
Others (mention)			

3. ORGANISATION

Please list the organization/s of which you are a member (include address)

- 1.
- 2.
- 3.

4. QUESTIONNAIRE

1. How did you find out about the Human Rights Internship Program?
2. Why are you interested in the Human Rights Internship Program? What do you expect from the Program?
3. Have you studied human rights and/or international human rights law? If so at what level and when?
4. How do you think this Program can benefit your organization or institution?
5. How are you going to use the knowledge and experience you are going to gain when you return to your home country? Specify your follow-up plans.
6. Have you been active in any human rights organization? If yes, please give a brief description of the organization and of how and when you were involved with it? Please attach a brochure of the organization in English if available.
7. What is your relationship with the human rights organization that recommended or sponsored you for the Program? (If you are not working for a human rights organization or if you are a student).
8. Have you participated in any other human rights internship or training programs before similar to the internship program you are applying for? If so, which ones, when and who sponsored you?
9. Who will sponsor your internship program financially?
10. Please specify the source of funding and sponsoring organization including their address.
11. Please specify any health problems that you have. Please give the name of your health insurance company that will cover you whilst you are in Switzerland.
12. Please write any specific questions or expectations you have about the Internship program.

Please send the following items. The recommendation letters can be sent by fax or email.

1. One color photo (as recent as last six months)
2. Photocopies of the pages of your passport showing when your passport was issued, and that it is in your name.
3. Two recommendation letters:
 - Recommendation letter from President or Secretary General of ICMICA federation in your own country.
 - Recommendation letter from President of your own organization (if you are already working for a human rights-related organization) or recommendation letter from president of any human rights organization that you are associated with in your area or country.
 - Recommendation letter from your university professor. (if you are a student)

Please send your completed application form to paulortega@paxromana.int.ch and budi@paxromana.int.ch by email as soon as possible.

Important Notice

This form is only an application form. There is a committee of selection who will have a discussion to decide the selection of participants based on certain criteria. Therefore the submission of this form is not a guarantee of the selection.

Thank you.