



Cyprus Red Cross Society
Psychosocial Support Program

Community Based Psychosocial Support Training 23-26 February 2016

Participant's Registration Form

Please complete the following and return to the address given below before 16/2/16

Email: reliefcoord@redcross.org.cy

Name/ Surname:

Phone number:

Email:

Age:

Sex:

Training language:

English:

Greek:

Educational Background:

Experience working in the field of psychosocial support and/or other related areas:

Please note that this is not a pre-requisite to the training workshop.

Experience with the International Red Cross Red Crescent Movement:

Please note that this is not a pre-requisite to the training workshop.

Expectations of the training workshop:

Issues you would like to see addressed in the workshop:

***Please note that there is a limited number of participation.**

Please return the completed form at the address given below before the 16th of February at the following email address: reliefcoord@redcross.org.cy