**Access to Employment Pilot 2020**

**Lead Youth Advocate Role - Application Form**

**อาสาสมัครผู้นำเยาวชน - ใบสมัคร**

**กรุณากรอกใบสมัครทุกฉบับเป็นภาษาอังกฤษ**

We are welcoming **all young people** (aged 18-35) **regardless of disability type** to apply and we will do our best to make any accommodations necessary to ensure you benefit from the project!

Please be aware, the nature of this advocacy project is to provide youth with disabilities with **skills and networks** necessary to develop employment skills and share their experiences of employment to **help policy makers** in their countries understand the challenges they may face. **The training provided is not intended to have a political message or nature.**

Please complete this form and **submit via email** to Ella.Hylton@leonardcheshire.org by midnight **Monday 31st August 2020**

If you have any further questions please do not hesitate to contact our Thailand team (Sawang: +66 96-9288761

Lynn: +66 97-2708842)

The following questions are aimed to help Leonard Cheshire ensure you meet the **appropriate criteria** for the role of Lead Youth Advocate and confirm your **personal details:**

1. Full Name:
2. Preferred Name:

1. I am a national of (please delete as appropriate): **Thailand / Indonesia**
2. Home Address:
3. Email Address:
4. Gender: **Female / Male / Non-binary (I don’t identify as either/or)**
5. Date of Birth (dd/mm/yyyy):
6. I will be at least 18 years old and not older than 35 years old by 12th August 2020. **Yes/ No**
7. I am able to offer a part-time commitment to the project over a 9-month period? **Yes / No**

**Responses to the following questions will not necessarily effect your eligibility for the role:**

1. I am currently (delete as appropriate): in full time education/ part-time education/ full time employment/ part time employment/ unemployed/ other (please state)
2. Are you currently part of a **DPO** (Disabled Persons’ Organisation) network (เครือข่ายองค์กรคนพิการ)? **Yes / No** If Yes, please include the name of the DPO.
3. Do you have a Disability Card? **Yes/ No**
4. If I am not chosen for the role of Lead Youth Advocate I would still be interested in participating in the project. **Yes / No**
5. Please describe any **accessibility requirements** that you would find beneficial when participating in the digital advocacy project: e.g. sign language interpretation, easy read documents, accessible electronic documents other:

1. **The following details are necessary to help us understand your technology and data capabilities:**

 Your Mobile Phone Number:

Your Mobile Network:

You Mobile Phone Model:

I own my mobile: **Yes / No**

I share my mobile with others: **Yes / No**

If Yes, who do you share it with?

I have access to a **regular mobile signal/ intermittent mobile signal** (e.g. only certain days of the week) **(สัญญาณมือถือหรือการเข้าถึงระบบอินเทอร์เน็ตตลอดเวลาหรือบางเวลา)**

**The following questions ask about difficulties you may have doing certain activities:**

**Do you have difficulty seeing, even if wearing glasses?**

a. No - no difficulty

b. Yes – some difficulty

c. Yes – a lot of difficulty

d. Cannot do at all

**Do you have difficulty hearing, even if using a hearing aid?**

a. No- no difficulty

b. Yes – some difficulty

c. Yes – a lot of difficulty

d. Cannot do at all

**Do you have difficulty walking or climbing steps?**

a. No- no difficulty

b. Yes – some difficulty

c. Yes – a lot of difficulty

d. Cannot do at all

**Do you have difficulty remembering or concentrating?**

a. No – no difficulty

b. Yes – some difficulty

c. Yes – a lot of difficulty

d. Cannot do at all

**Do you have difficulty (with self-care such as) washing all over or dressing?**

a. No – no difficulty

b. Yes – some difficulty

c. Yes – a lot of difficulty

d. Cannot do at all

**Using your usual (customary) language, do you have difficulty communicating, for** example understanding or being understood?

a. No – no difficulty

b. Yes – some difficulty

c. Yes – a lot of difficulty

d. Cannot do at all

The following part of the application is scored in order to judge your suitability for the role:

คำถามต่อไปนี้จะได้รับการประเมินเพื่อวัดความเหมาะสมในการเป็นผู้นำเยาวชน

**Please write a brief answer for each statement (approx. 30 words)**

1. Describe any previous **community engagement** activities you have carried out with your peers/ youth with disabilities (การมีส่วนร่วมทำงานในชุมชน):
2. Describe any previous experience you have **facilitating/ leading groups** of your peers/ youth with disabilities (ประสบการณ์ในการช่วยสนับสนุนหรือเป็นผู้นำกลุ่ม):
3. Describe what skills you hope to develop during this project (ทักษะที่อยากเรียนรู้):
4. The community issues relating to youth with disabilities I feel most strongly about are (ปัญหาชุมชนที่เกี่ยวกับเยาวชนพิการใดบ้างที่ฉันรู้สึกอยากแก้ไขมากที่สุด):
5. Please **describe** the extent to which you use the following social media platforms and **how** you have utilized them in engaging in issues regarding youth with disabilities:

(คุณใช้ช่องทางใดบ้างในโซเซียลมีเดีย บ่อยแค่ไหน และใช้ในเรื่องใดบ้าง):

**Twitter:**

**Facebook:**

**Blogging:**

**Other platforms:**

I confirm that the information I’ve provided in this application is correct to the best of my knowledge and I consent to my data being Stored by Leonard Cheshire. **YES/ NO**

For information on how we store data please follow our link to our International Privacy Policy:

<https://www.leonardcheshire.org/about-us/privacy-notice/international>