**NALAS Task Force on**

**ASSOCIATION DEVELOPMENT**



# SHADOWING REQUEST FORM

|  |
| --- |
| Applicant Association |
|  |
| Association's Name: |  |
| Participant's Name: |  |  |  |
| Participant Job Title: |  | Department: |  |
| Contact Phone: |  | Email: |  |
| Date: |  | Preferred Visit Period: |  |
| * Please attach the participant’s CV with this form
 |
| Request Information |
|  |
| Requested Model: [ ]  Model 1 – Learning good practices [ ]  Model 2 – Sharing knowledge and experienceArea of Interest:

|  |  |
| --- | --- |
| Advocacy :[ ]  Policy development[ ]  Committee structure[ ]  Cooperation with the GovernmentServices :[ ]  Training[ ]  Legal Advice[ ]  Consultancy[ ]  Capacity building programs[ ]  E-government[ ]  Research[ ]  Networking | Association’s strengthening:[ ]  PR/communication **Project management**[ ]  Fundraising[ ]  Internal Management[ ]  IT[ ]  HR[ ]  International Cooperation[ ]  EU integration[ ]  Leadership[ ]  Strategic Planning[ ]  Financial Management[ ]  Income generationOther:       |

Description of the Request:

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| Sharing Association |

|  |
| --- |
| Preferred Knowledge Sharing Association: |
| Is the Knowledge Sharing association interested in the specific program?[ ]  Yes [ ]  No [ ]  We did not contact any association |
| Preferred Language/s: |

**Budget:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Items** | **Unit** | **No of units** | **Cost per unit** | **Total costs** | **Request from NALAS** | **LGA's contribution** |
| 1 | Accommodation | nights  |  |  |  |  |  |
| 2 | Per diem | days |  |  |  |  |  |
| 3 | Travel (using [www.viamichelin.com](http://www.viamichelin.com)) | km |  |  |  |  |  |
| **TOTAL** |  |  |  |