**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 experience  Area of Interest:   |  |  | | --- | --- | | Advocacy :  Policy development  Committee structure  Cooperation with the Government  Services :  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 generation  Other: |   Description of the Request:   |  | | --- | |  | |  | |  | |  | |  | | | | | | |
| 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** | | | | |  |  |  |