

Version October 2024 SERVICE VOLONTAIRE DE COOPERATION Confirmation of participation in an activity **Sending organisation** Title of the activity Name of the sending organisation Venue of the activity **Participant** Surname First name **Country of residence** Date of arrival **Date of departure Activity start date Activity end date Support** Monthly food allowance received ☐ No ☐ Yes □ n/a Monthly pocket money received ☐ Yes □ No □ n/a Accommodation provided □ n/a ☐ Yes □ No Monthly amounts received Month Food allowance (€) Accommodation (€) Pocket money (€) **Total amount** Signature & Stamp Participant's signature Sending organisation