FORM H1 - INFORMATION ON HOSTING ORGANISATIONS

The host organisations are kindly requested to complete this information form legibly in English, French or German and to send it by email to the national co-ordinator before 31 October 2024 at the latest.

The following information should also be considered.
The acceptance of two candidates can have several advantages for the hosts themselves and for the professionals who in that case should preferably have different nationalities.
Following discussion with the participant(s), the host organisation agrees on sending by email to the participant(s) a written and detailed draft version of the individual programme before the deadline set up by HOPE.

GENERAL INFORMATION		
Organisation		
Name of the Chief Executive/ General Director		
Full address and short description of location in terms of country/region/major cities		
Organisation website		
Tel (international codes as well)	+	
E-mail		
Type of organisation (tick the box)	q Primary care organisation q Acute hospital – teaching q Acute hospital – non-teaching	q Psychiatry q Rehabilitation q Other (association, agency etc.)
Number of beds (for hospitals)		
Short description of services provided		

EXCHANGE POSTS	
Number of exchange posts available	
Specific candidate profile requested	
Language(s) accepted Please indicate as well if basic knowledge of the official language of your country is required.	

ACCOMMODATION		
The host organisation will provide decent accommodation on a free basis. Please tick the appropriate box(es) and indicate some details on the accommodation and bathroom facilities.		
ROOM TYPE		
Individual room	q	
Shared room	q	
Individual room with shared facilities	q	
TYPE OF ACCOMMODATION		
Hospital Campus	q	
Hospital room	q	
University/Student Room	q	
Hotel	q	
Apartment/Cottage	q	

OTHER DETAILS	
Please provide generic information about which facilities exist around the accommodation area (public transport, laundry, restaurants etc.)	
Estimated time to host organisation	q up to 15 min q up to 30 min q up to 1 hour
Need to use public transport	q Yes q No
Host takes on transport charges in case of national meeting(s)	q Yes q No
Host takes on accommodation charges in case of national meeting(s)	q Yes q No
What will be the price the professional will have to pay for meals/day?	

INSURANCES	
Need for specific health insurance coverage in case of accident/illness. Tick box	
European Health Card accepted	q
Private Insurance advised	q
Host organisation insurance	q
Other	q

PERSON IN CHARGE - CONTACT	
Person in charge of the scheme, designated by the host	
Name	
Position	
Tel (international codes as well)	+
Mobile	+
E-mail	
Best way to be contacted by the participant during the exchange period	
Experience in previous HOPE/foreign exchanges	
As co-ordinator	q Yes q No
As participant	q Yes q No

Place and date

Name and signature of the
CEO or General Director