



Fundusze Europejskie
dla Lubelskiego

Dofinansowane przez
Unię Europejską



NEEDS / REASONABLE ACCOMMODATIONS FORM FOR PERSONS WITH DISABILITIES

in the project "New Possibilities"

No. FELU.08.03-IP.02-0005/25

The Organizer of the project titled "New Possibilities" No. FELU.08.03-IP.02-0005/25 ensures the accessibility of the project for persons with disabilities. The project offers the possibility to use accessibility services such as a sign language interpreter, an assistant for a person with a disability, training materials in an accessible format (e.g., electronic format with the option to enlarge print or invert contrast), or others depending on the needs of the applicants.

| SPECIAL NEEDS REQUEST FORM | |
|---|--|
| In connection with my participation in the project "New Possibilities", I hereby request that my special needs be accommodated within the framework of the project. | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE |
| Type of need | Please describe your need in detail |
| <input type="checkbox"/> Adaptation of space due to my mobility limitations | |
| <input type="checkbox"/> Provision of a specialized format of project/training materials | |
| <input type="checkbox"/> Provision of specialized equipment enabling/facilitating my participation in the project | |
| <input type="checkbox"/> Provision of a sign language interpreter (PJM - Polish Sign Language / SJM - Sign-Supported Polish), a deafblind interpreter-guide, a guide, an assistant for a person with a disability | |
| <input type="checkbox"/> Other (please specify): | |
| <input type="checkbox"/> Other (please specify): | |

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Place and date

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Legible signature of the Candidate