

## Journalists-in-Residence Programme

# QUESTIONNAIRE

### YOUR CURRENT SITUATION

**Please describe your situation today.** As a result of your work as a journalist, are you currently exposed to surveillance, to threats or to persecution, or are you anticipating any of the above to happen shortly? If yes, please provide details and indicate who you suspect to be behind it.

**Are you (or have you been) in touch with any other organizations and/or governments to improve your current situation?** If so, please list all organizations below, along with names of staff you communicate with and their contact details. We may be able to work on your case more efficiently if we know which other groups are involved.

**Do you have any medical or health conditions that the ECPMF should be aware of?**

If so, are these conditions related to any past ill-treatment and/or torture you have received? If applicable, please describe below. All info provided by you will be treated as strictly confidential.

**Do you have any other needs that the ECPMF should be aware of?** This could be (among other things) wishing to see a psychologist or trauma therapist, receiving legal counsel, or taking part in a journalism-related training. All info provided by you will be treated as strictly confidential.

Are there **additional reasons** that you have received threats or ill-treatment other than your journalistic work? If so, please explain. (Additional reasons may include persecution due to gender, sexual orientation, affiliation to a religious or social group, ethnicity, perceived political opinion, etc.)

### INDIVIDUAL PLANS FOR RESIDENCY IF ACCEPTED

If selected, what are your **intentions/plans/expectations** for your residency at the ECPMF? Please elaborate.

I confirm that the information provided in this questionnaire is correct, true and complete. I hereby give my consent for the personal data which I provide during the application process for the Journalists-in-Residence Programme to be collected, stored, processed, used and forwarded in order to ascertain my eligibility for participation in the programme and its evaluation. Data will be employed by the European Centre for Press and Media Freedom (ECPMF) only. No details will be shared with any other public or private institutions). My consent is subject to observance of the applicable data protection laws. I have been informed that my application form cannot be processed without this declaration of consent.

Date and place:

Your signature: \_\_\_\_\_