



Notice of participation in the training

The project "Cross-border biking: next level adventurous tourism in Mavrovo-Rostushe and Debar" is financially supported by the European Delegation in the Republic of Northern Macedonia within the cross-border program Republic of Northern Macedonia - Republic of Albania under the Instrument of First Aid acceptance (IPA II) for 2016 & 2017.

The project is being implemented by:

- Albanian Local Capacity Development Foundation (ALCDF)
- Association for Active Tourism Explore 2018, Ohrid
- Dibër Regional Council
- Municipality of Mavrovo and Rostusha

The overall objective of the project is:

Further development in the economic sector of adventure tourism in the area between the border Mavrovo-Rostushe and Debar, through the creation of new tourism products with the goal of increasing the number of domestic and foreign visitors.

In the framework of the second objective of this project, it is foreseen to build 40 km of bike trails in our CbC region, the area of Dibra in the Republic of Albania and the area of Mavrovo-Rostushe in the Republic of Northern Macedonia.

Through this call we aim to train 15 employees or specialists for the construction and maintenance of bicycle paths for Mavrovo and Rostushe area, more specific (higher zone above v.Zirovnica).

Employees or specialists who are interested in participating in the training must submit a written request (Application Form) to the e-mail address: ilber.imerovski@gmail.com

The number of persons to participate in this training is limited to 15.

The selection criteria of the applicants are as follows:

1. *Age 18 - 50 years.*
2. *Preferable place of residence in the region of Mavrovo and Rostushe municipality.*
3. *Persons who have a training certificate or participation in training like this training are at an advantage.*
4. *Health certificate.*
5. *Previous experience in the field of construction works.*
6. *Physically fit person.*

The application deadline is November 30th, 2020 at 16:00.

To apply you must complete the application form attached to this notice and send it to the email address cited above.

With respect and consideration



PROJECT team

APPLICATION FORMAT

Name and surname	
Date of Birth	Copy of ID card
Birthplace	
Residence	
Email address (if any)	
Phone number	
Trainings completed or certificates obtained	List and document attached
Reasons why you apply	

Note: After filling the respective cells in this form on your part, the highlighted yellow part should be deleted.