## **Application to Participate in the Workshop**

Name of Workshop	Human Security, Rights, and Freedoms
Participant Name	
Discipline	
College	
College Address	
Home Address	
Home/Cell Phone #	
College e-mail	
Course Title*1	
Course Number*1	
Module Focus <sup>*2</sup>	
Please indicate <b>YES or NO</b> , whether you are able to participate in the above workshop on:	
August 04 - 08, 2025	
August 11 - 15, 202	

## **Notes:**

- 1. \*1 Indicate the *course title and course number*, for which you intend to develop a module.
- 2. \*2 Describe what you would like to focus on your module (e.g., topic, region/country)
- 3. Send to: <a href="mailto:tsypris@kvcc.edu">tsypris@kvcc.edu</a> (Theo Sypris, Director of Midwest Institute for IIE)