**PARTICIPANT QUESTIONNAIRE**

Please fill in this Questionnaire *after* you finish creating your contest entry. To fill it in, write on the dots (….) or tick (X)

the box (□) next to the answers you choose. Your answers will not affect your chances of winning.

**I chose number ……. from the List of Suggested Topics on the Contest Leaflet.**

1. Last name(s), first name(s): ……………………………………………………….................................……………….

2. Sex (M/F): ………….. 3. Age: …… 4. Country of origin: ……………………….………...........................................

5. Complete address: ....………………………………………………………………………...............................….........

…………………………………………………………………….………………………..………........................................

6.1. Is there a telephone number where we can reach you? YES □ NO □

6.2. *If your answer is YES,* what is that phone number? …………………….....................................…………………

6.3. What kind of phone number is that? Your own mobile (cell) phone □ The mobile of a friend or relative □

Your home phone □ The phone at your school or workplace □ Other □ ..................................………….

7.1. Do you have an e-mail address? YES □ NO □

7.2. If you have an e-mail address, what is it? ………….………………………....................................………………

8. How would you describe the place where you now live? The capital city of the country □

 Suburb of the capital □ Another big city □ A small or medium-sized town □ A village or a rural area □

9.1. Are you enrolled full-time at a school or at a training centre? YES □ NO □

9.2. *If your answer to question 9.1 is YES*, what is the name of your school or training centre? …………..……………………………………………………………….…………......................................………………

9.3 *If your answer to question 9.1 is YES*, what is your current class level?………………………………….............

9.4. *If your answer to question 9.1 is NO,* what is the highest class level you have completed? ............................

10. How are you participating in the contest? alone □ in a team □

**If you are participating in a team, please state:** (counting yourself in these numbers)

 10.1. The number of members of your team: ………….

 10.2. The number of boys/men in your team: ………….

 10.3. The number of girls/women in your team: ………….

 10.4. The number of team members currently enrolled full-time at a school or training centre: …….

11.1 Do you have a television in your home?              YES □       NO □

11.2 Do you have Internet access in your home?                  YES □       NO □

11.3 Do you have your own e-mail address? YES □       NO □

11.4 Do you have your own mobile phone? YES □       NO □

11.5 Do you have Internet access on your mobile phone?        YES □       NO □

11.5 On average, how many hours do you spend each week:

11.5.1 Using a computer (including being online on a computer): \_\_\_\_ hours

11.5.2 Online (using the Internet on a computer, phone or other device): \_\_\_\_ hours

**Please return your entry (or entries) and your completed Questionnaire to one of the following addresses. Thanks, and good luck!**

**Global Dialogues**

**P.O. Box 33567**

**Decatur, GA 30033**

**USA**

**OR: via email to contest@globaldialogues.org**