**Expression of Interest in Appointment as Regional Commissioner an External Representatives of IFSW Europe e.V.**

**Deadline: By email or in person in the Delegates Meeting 4th October 2025 17:00 CET**

Your name:İrem Cosansu Yalazan

Your member Organisation: Association of Social Workers in Turkiye (Sosyal Hizmet Uzmanlari Dernegi SHUDER)

Your contact e-mail address:iremcosansu@gmail.com

Please indicate the position(s) you are interested and the capacity in which you would wish to serve. The term of office is one year renewable at the Delegates’ Meeting

Please X as appropriate

|  |  |  |
| --- | --- | --- |
| Position | Representative | Support Member |
| Council of Europe (CINGO) | ☐ | ☐ |
| IFSW Europe Human Rights Network | ☐ | ☐ |
| IFSW Global Ethics – Regional Commissioner | ☐ | ☐ |
| European Anti-Poverty Network | ☐ | ☐ |
| European Union Agency for Fundamental Rights | ☐ | ☐ |
| European Social Platform | ☐ | x |
| Eurochild | ☐ | ☐ |
| IFSW Global Education – Regional Commissioner | ☐ | ☐ |
| International Gerontological Society | ☐ | ☐ |
| IFSW Global Indigenous Commission – Regional Commissioner | ☐ | ☐ |
| Council of Europe Romani and Traveller Team | ☐ | ☐ |
| Other proposed representation – please specifiy what area you are interested in |  |  |

Please give a brief account of knowledge and experience you have relevant to the position(s) below:

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| --- |
| I have long experience of preparing and implementing of an IPA Project funded by the European Union. The project was implemented by the technical support of WHO European Region and WHO Country Office in Türkiye. I am interested in the preparation of the international legislation and framework documents. I would like to understand the work of European Social Platform and contribution of the IFSW Europe. |

**Please provide the following information**

Current Employment Status: non paid position as the President

Length of Time Position held: Since April 12th, 2025 (two years)

Do you have the support of your employer to attend meetings? I have support of Executive Board of Association of Social Workers in Turkiye

Will you be allowed time off work to attend meetings? Yes

Do you have the support of your Membership Organisation? Yes

How much of your own time are you able to devote to the position (s) 2-3 days in a month

Please indicate the level of your skills in both spoken and written English and in any other languages using the codes below:

Fluent (1); Very good (2); Good (3); Fairly good (4)

|  |  |  |
| --- | --- | --- |
| Understanding 4 | Spoken 3 | Written 4 |
|  |  |  |
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Please indicate the level of your IT skills using the codes below:

Excellent (1); Very good (2); Good (3); Fairly good (4)

|  |  |
| --- | --- |
| E-Mail | 4 |
| Word | 4 |
| Excel | 4 |
| Power point | 4 |

The completed form shall **preferably be sent by e-mail by 20th October 2024 17:00 CET** For the attention of the Honorary Secretary, via [europe@ifsw.org](mailto:europe@ifsw.org) or should **be presented to the President or Vice President of IFSW Europe by 18:00 Lisbon time on 25 October 2024 in person at the Delegate’s meeting**