NATO Summit

THIMUN the Hague 2027

MUN Directors: Return this form to the following E-Mail by the 25.09.2026: applications@thimun.org.

Deadline: 25th September 2026

Instructions

1. Complete the applicant's **Personal Information** section.
2. The applicant should fill in the following sections, regarding **Experience** and **Motivation**.
3. As the MUN Director, please provide a **Letter of Recommendation** in the space provided.
4. The MUN Director is to send the completed application form and the Letter of Recommendation by email to: applications@thimun.org by the 25th of September 2026.
5. The **subject line** in the E-Mail should be: NATO – NAME
6. Throughout the application Arial size **10** must be used.

1. Personal Information

Full Name	
Attending School	
E-Mail	
Grade	
Nationality	
Telephone Number (With Country Code)	

2. Experience

A. List your experiences at THIMUN or THIMUN Affiliated Conferences (if you have multiple experiences, please select the most relevant):

Conference Name	THIMUN Affiliation	Year	Position	Committee

B. Briefly outline any relevant experience you have, which motivates you to serve at the NATO Summit:

C. If possible, which position would you like to serve:

☐ President ☐ Deputy President ☐ Member Country (Please Specify): _____

3. Letter of Motivation

1. Submit a letter of motivation (maximum **250 words**) that addresses the following:
   - What you gained from previous MUN Experience.
   - Your understanding of NATO.
   - Your goals for your chosen role
2. Type below or copy and paste it into the space provided.
3. Use font size **10** or **11**.
4. Sign and date your letter.

By signing below, you hereby acknowledge that you have read, understood and agreed with the THIMUN Terms and Conditions, Code of Conduct and Privacy Policy found in the THIMUN Website and filled out the letter of motivation truthfully.

Signature Student	**Date (Day/Month/Year)**

4. Letter of Recommendation (MUN Director)

As the MUN Director, please provide your assessment of the applicant's suitability for the position they are applying for below. Please limit your response to the space provided.

Instructions

1. Type your recommendation below or copy and paste it into the space provided.
2. Use font size **10** or **11**.
3. Sign and date the recommendation.
4. Submit the signed recommendation together with the completed application form as one application. Incomplete applications will not be considered.
5. If submitting multiple applicants, indicate your order of preference.

By signing below (following page), you hereby acknowledge that you have read, understood and agreed with the THIMUN Terms and Conditions, Code of Conduct and Privacy Policy found in the THIMUN Website and filled out the letter of recommendation truthfully.

Signature Teacher	**Date (Day/Month/Year)**

End of Application