

## **Expression of Interest**

Date	
Inclusion in the Roster for Provision of Legal Services to  HaMoked: Center for the Defence of the Individual	
Name	
ID # and/or Income Tax file #:	
Address of Office:	
Telephone	
Email	
Years of experience in work concerning rights of Palestinians:	
Years of experience in work with HaMoked:	
Languages	
* Please print out the form, sign it and send a scanned copy to: tenders@hamoked.org.il	
Signature:	