**Partner Identification Form**

|  |
| --- |
| Identification of the promoter (partner organisation) |
|  |
| A.1. Details of the promoter |
| Promoter’s Legal Name (national language) |  |
| Promoter’s Legal Name (latin characters) |  |
| Acronym, if applicable |  |
| **PIC Code (9 digits)** |  |
| National ID Number, if applicable |  |
| Department, if applicable |  |
| AddressCity |  |
|  | Postcode |  |
| Region |  | Country |  |
| Email |  | Website |  |
| Telephone |  | Telefax |  |
|  |
| A.2. Person authorised to legally commit the promoter (legal representative) |
| Name and Surname |  | Gender  |  |
| Position/function |  |
| AddressCity |  |
|  | Postcode |  |
| Region |  | Country |  |
| Email |  |
| Telephone |  | Telefax |  |
|  |
| A.3. Person responsible for the implementation of the action (contact person) |
| Name and Surname |  | Gender |  |
| Position/function |  |
| AddressCity |  |
|  | Postcode |  |
| Region |  | Country |  |
| Email |  |
| Telephone |  | Telefax  |  |
|  |
| B.1. Profile of the promoter  |
| Type and status: | [ ]  Public body [ ]  Private body  |
| (copy and paste this symbol [x]  to chose the appropirate choice) | [ ]  Non-profit/non-governmental organisation[ ]  Informal group of young people [ ]  Body active at European level in the youth field (ENGO)[ ]  Other – please specify: ………………………… |
| Has the organisation received any type of accreditation before submitting this application? If yes, please fill: |
| Accreditation Type: |  |
| Accreditation Reference: |  |
| B.2. Objectives and activities of the promoter |
| *Please provide a short presentation of your organisation (key activities, affiliations, size of the organisation, etc.) relating to the area covered by the project.* *(limit 2000 characters).* |
|   |
| *Please describe the role of your organisation/group in the project. (limit 1000 characters).* |
| *What are the activities, skills and experience of the organisation in the areas relevant for this application, including where relevant a list of recent publications related to the domain of the project (European citizenship, European awareness, Citizenship education, Active participation of young people)? (limit 2000 characters).* |
| *What are the skills and expertise of key staff/persons involved in this application? (limit 1000 characters).* |
|  |
| B.3. Have you received/applied for a EU project in the last financial year preceding this application? If yes, please fulfil the table with the needed information. (add more rows if needed) |
| Programme or Initiative | Identification/contract number | Contracting promoter | Title of the Project |
|  |  |  |  |
|  |  |  |  |
| C.1. Travel of the group |
| Airport of departure | Airport of Arrival | Transports used | Distance to Belgrade (use the distance calculator tool[[1]](#footnote-1) of Erasmus+) |
|  |  |  |  |
| D.1.3. Visa costs Do your participants need any extra or visa costs? How much? (100% per participant) |
|  |

1. <http://ec.europa.eu/programmes/erasmus-plus/tools/distance_en.htm> [↑](#footnote-ref-1)