**PARTNER FORM**

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| **Partner Organisation** |
| PIC number |  |
| Type of Organisation |  |
| **Background and Experience** |
| Please briefly present your organisation. |
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| What are the activities and experience of your organisation in the areas relevant for this application? |
|  |
| Please give information on the key staff/persons involved in this application and on the competences and previous experience that they will bring to the project. |
|  |
| **Motivation** |
| Your motivation to participate in this project? |
|  |
| **Legal Representative** |
| Title |  |
| Gender |  |
| First Name |  |
| Family Name |  |
| Position |  |
| Email |  |
| Telephone |  |
| **Contact Person** |
| Title |  |
| Gender |  |
| First Name |  |
| Family Name |  |
| Position |  |
| Email |  |
| Telephone |  |