|  |  |  |
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| PARTNER INFORMATION | | |
| PIC | |  |
| Promoter’s legal name (national language) | |  |
| Promoter’s legal name (latin characters) | |  |
| Acronym | |  |
| National ID (if applicable) | |  |
| Department (if applicable) | |  |
| Address | |  |
| Country | |  |
| Region | |  |
| P.O. Box | |  |
| Post Code |  | | |
| City |  | | |
| Web site |  | | |
| Email |  | | |
| Telephone |  | | |
| Fax |  | | |
| Profile | | | |
| Type of Organisation |  | | |
| Is the partner organisation a public body? |  | | |
| Is the partner organisation a non-profit? |  | | |
| **Acreditation** | | | |
| Has the organizacion recivied eny tipe of acreditation before subliming this aplication? (*write acreditation type and acreditation referencis*) |  | | |

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| --- | --- |
| INFORMATION FOR MANDATE | |
| **full official name of partner organisation** |  |
| **official legal status or form** |  |
| **official registration No** |  |
| **full official address** |  |
| **VAT number** |  |
| **forename, surname, function of the legal representative of the mandating partner organisation** |  |
| Legal Representative | |
| Title |  |
| Gender |  |
| Family name |  |
| First name |  |
| Department |  |
| Position |  |
| Email |  |
| Telephone |  |
|  |  |

***2. Contact person***

|  |  |
| --- | --- |
| First name: |  |
| Family name: |  |
| Title: |  |
| Telephone: |  |
| Role in the organisation: |  |
| E-mail address: |  |
| Address (if the address is different from the address of the organisation): |  |

***5. Aims and activities of the organization***

5.1. Please provide a short presentation of your organisation (key activities, affiliations etc.) relating to the domain covered by the project. (Max. 1000 characters)

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5.2. What are the activities and experience of your organisation in the areas relevant for this application?

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5.3. What are the skills and expertise of key staff/persons involved in this application?

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***6. Other EU grants***

Please list the projects for which the organisation, or the department responsible for the management of this application, has received financial support from the EU Programme during the last three years.

|  |  |  |  |
| --- | --- | --- | --- |
| **Programme or initiative** | **Reference number** | **Beneficiary Organisation** | **Title of the Project** |
|  |  |  |  |
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Please list other grant applications submitted by your organisation, or the department responsible, for this project proposal. For each grant application, please mention the EU Programme concerned and the amount requested.

|  |  |
| --- | --- |
| **Programme concerned** | **Amount requested** |
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