**PARTNERSHIP TEMPLATE**

Is your organisation interested in participating in our Erasmus+ Erasmus+ KA1 “Mobility of youth workers” project? We would like to know your experiences, possible inputs (knowing your expertise) and the types of activities you will contribute with regards to our project content and objectives.

**PARTNER ORGANIZATION**

**PIC:**

**Full legal name:**

**Acronym:**

**National ID (if applicable):**

**Department (if applicable):**

**Address:**

**Country:**

**Region:**

**P.O. Box:**

**Post Code:**

**CEDEX:**

**City:**

**Website:**

**Email:**

**Telephone:**

**Fax:**

**Type of Organisation:**

**Is the partner organisation a public body?**

**Is the partner an organisation a non-profit?**

**Has the organisation received any type of accreditation before submitting this application? If yes, please specify the Accreditation Type and Reference:**

1. **Please give brief information on your organization.**
2. **What are the activities and experience of your organisation in the areas relevant for this application?**
3. **What are your suggestions and comments for this project?**
4. **Please give information on the key staff/persons involved in this application and on their competences and previous experience. (youth workers that probably will participate at the meeting)**
5. **Who is the Legal Representative of your organization?**

**Title:**

**Gender:**

**First Name:**

**Family Name:**

**Department:**

**Position:**

**Email:**

**Telephone:**

1. **Who is the Contact Person?**

**Title:**

**Gender:**

**First Name:**

**Family Name:**

**Department:**

**Position:**

**Email:**

**Telephone:**