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**ERASMUS+ PROGRAMME**

**Partner Identification Form**

**1.PARTNER ORGANISATION**

|  |  |
| --- | --- |
| **PIC** |  |
| **Full legal name****(National Language)** |  |
| **Full legal name (Latin characters)** |  |
| **ACRONYM** |  |
| **National ID (if applicable)** |  |
| **VAT No and Tax Office** |  |
| **Department (if applicable)** |  |
| **Address** |  |
| **Country** |  |
| **Region** |  |
| **P.O. Box** |  |
| **Post Code** |  |
| **CEDEX** |  |
| **City** |  |
| **Website** |  |
| **Email** |  |
| **Telephone 1** |  |
| **Telephone 2** |  |
| **Fax** |  |

**2.PROFILE**

|  |  |
| --- | --- |
| **Type of Organisation** |  |
| **Is the partner organisation a public body?** |  |
| **Is the partner organisation a non-profit?** |  |

**3.ACCREDITATION (optional)**

|  |  |
| --- | --- |
| **Accreditation Type** | - |
| **SVE Charter** | - |

**4.BACKGROUND AND EXPERIENCE**

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| **Please briefly present the partner organisation.** |
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| **What are the activities and experience of the organisation in the areas relevant for this application?** |
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| **What are the skills and expertise of key staff/persons involved in this application (especially regarding cultural activities , best: connected with cinema).** |
|  |

**5.FORMER PROJECT EXPERIENCES**

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| --- | --- | --- | --- |
| **Programme or initiative** | **Identification/contract number** | **Contracting promoter** | **Title of the project** |
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**6.LEGAL REPRESENTATIVE**

|  |  |
| --- | --- |
| **Title** |  |
| **Gender** |  |
| **First Name** |  |
| **Family Name** |  |
| **Department** |  |
| **Position** |  |
| **Email** |  |
| **Telephone 1** |  |
| **Telephone 2** |  |

**7.CONTACT PERSON**

|  |  |
| --- | --- |
| **Title** |  |
| **Gender** |  |
| **First Name** |  |
| **Family Name** |  |
| **Department** |  |
| **Position** |  |
| **Email** |  |
| **Telephone 1** |  |

*\*If the address is different from the one of the organisation, please write here:*