***MediaSmarts***

**C.2. Partner organization**

PIC:

Full legal name (national language):

Full legal name (Latin characters):

Acronym:

National ID (if applicable):

Department (if applicable):

Address:

Country:

P.O. Box:

Postcode:

CEDEX:

City:

Website:

Email:

Telephone:

Fax:

**C.2.1. Profile**

Type of Organisation:

Is the partner organisation a public body?

Is the partner organisation a non-profit?

**C.2.2. Accreditation**

Has the organisation received any type of accreditation before submitting this application?

Accreditation of Youth Volunteering Organisations (ERAPLUS-EVS-CHARTER)

Accreditation reference:

**C.2.3 Backgroung and experience**

Please briefly present the partner organization:

**C.2.4. Legal Representative**

Gender:

First Name:

Family Name:

Department:

Position:

Email:

Telephone 1:

**C.2.5 Contact person**

Gender:

First Name:

Family Name:

Department:

Position:

Email:

Telephone 1:

1. What is your experience in Erasmus + programme and media literacy?
2. How this project about media literacy and critical thinking meets the needs and objectives of your organization?
3. Do you intend to involve participants with fewer opportunities? Please give information about their profile/background
4. Which kind of preparation will you offer to your participants (e.g. task-related, intercultural, linguistic, risk-prevention etc.)?