**ANNEX 1**

**APPLICATION FORM**

**for funding from the Fund for bilateral relations - Measure A: Partnership Development**

**PA17/RO13 - Promotion of diversity in culture and arts within European cultural heritage**

**Title of the partnership action: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. Applicant’s name and acronym:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Acronym: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Applicant’s contact:**

Correspondence address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Town (city): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Authorized person to represent the applicant (legal representative):**

Name and surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position within the organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Correspondence address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone/mobile:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Contact person within the organization:**

Name and surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position within the organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Correspondence address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**5. Partner(s) organization in Donor State/ Romania:**

Name and acronym:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Correspondence address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Town (City):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Contact person within Donor state/ Romanian organization**

Name and surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position within the organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Correspondence address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone/mobile:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**7. Brief description of the applicant organization:**

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| *Please describe briefly the organization involved in this partnership action: intervention area, legal status, activities undertaken, organizational profile, etc. (maximum 200 words)* |

**8. Brief description of the potential partner organization:**

|  |
| --- |
| *Please describe briefly the organization involved in this partnership action: intervention area, legal status, activities undertaken, organizational profile, etc.*  *Was there any previous collaboration with the potential partner? If so, give details. (maximum 200 words)* |

**9. The bilateral partnership action is envisaged for a future project that will target:**

Awareness of cultural diversity raised and intercultural dialogue

Documentation of cultural history

**10. The bilateral partnership action is envisaged for:**

Small projects (5000-15000 euro)

Large project (50000-200000 euro)

**11. Contribution to the objectives of the Programme:**

|  |
| --- |
| *Please describe why your organization applied for this partnership action, how it contributes to the overall objective of the EEA Mechanism and the objectives of the Programme, how this proposal is coherent with the organization’s mission, etc.* |

**12. Motivation for the partnership action**

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| --- |
| *Describe the envisaged (future) project: idea, objectives, expected results*  *Please describe what type of activities you plan to do (attend conferences, have bilateral meetings, etc), highlighting the involvement of each organization.*  *Present the sustainability of the future partnership.* |

**13. Description of the partnership action**

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| --- |
| *Please describe the applicant and the potential partner organization in correlation with area of collaboration;*  *Present the expertise / experience of the applicant and the potential project partner and the proposed roles in the future project;*  *Detail the activities planned for the partnership action (visit plan).* |

**14. Outcomes of the partnership action**

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| *Please describe the outcomes of mobility project, both in terms of future Funding Application, as well as from other perspectives (collaborations, project ideas, published materials and/or articles, etc).*  *It will be highlighted the manner in which the outcomes of mobility and activities proposed(during mobility and after)* *will contribute to strengthening bilateral relations*, *in terms of development cooperation, common outcomes, increase mutual knowledge and understanding between Donor States and Romania, as primary function of EEA Grants.* |

**15. Outcome indicators:**

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1. Number of project partnership agreements
2. Number of persons involved in exchange visits between Romania and Donor States
3. Number of articles published regarding culture in one country about the other partner country
4. Number of other programs/ international networks that the partners intend to apply for receiving financing

**16.** **Please give details of the applicant and partner persons who will participate in the mobility project (who will travel within the partnership action)**

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| --- | --- | --- | --- |
| **Organization** | **Name** | **Surname** | **Position within the organization** |
|  |  |  |  |
|  |  |  |  |

**17. Project budget**

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| --- | --- | --- | --- | --- | --- |
| **Expenditures** | **Unit** | **No. of units** | **Unit value (Euro)** | **No of participants** | **Estimated budget (Euro)** |
| **1. Subsistence allowance expenses** | | | | | |
| 1.1 Subsistence allowance expenses abroad\* | day |  |  |  |  |
| **Subtotal Subsistence allowance expenses** | | | | |  |
| **2. Transport** | | | | | |
| 2.1 International Transport (round trip)\*\* | trip |  |  |  |  |
| 2.2 National Transport |  |  |  |  |  |
| 2.3 Travel insurance |  |  |  |  |  |
| **Subtotal Transport** | | | | |  |
| **3. Other expenditures** | | | | | |
| 3.1 Fees for participation in conferences, seminars and workshops |  |  |  |  |  |
| **Subtotal other expenditures** | | | | |  |
| **Grand total** | | | | |  |

**No. of units \* Unit value \* No of participants = Estimated budget**

\* Subsistence allowance expenses abroad: accommodation, per diem under national legislation;

\*\* For the reimbursement of expenses for plane travel, it is mandatory to submit the boarding passes.

*All expenditure included in the financial report has to be accompanied by the supporting documents.*

I, the undersigned, as legal representative of <*name of the organisation*>, being aware that false statements made in declaration are punished by the penal law, confirm on behalf of our institution / organisation that the information contained in this form are true, complete and accurate and can be proved by official documents which can be made ​​available to the Project Management Unit.

|  |
| --- |
| Date and place:  Stamp and signature of the legal representative: |