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**EEA Grants 2014-2021: Programme Education**

**Institutional cooperation projects**

**Mobility projects**

**VET projects**

**Inclusive education projects[[1]](#footnote-1)**

**LETTER OF INTENT**

|  |  |
| --- | --- |
| Project title |  |
| Call for proposal number |  |
| **Project promoter** |
| Name of the institution |  |
| Address |  |
| Registration number (IČ) |  |
| Legal representative | Name |  |
| Contact person | Name |  |
| **Project partner** |
| Name of the institution |  |
| Address |  |
| Registration number (IČ) |  |
| Legal representative | Name |  |
| Contact person | Name |  |

|  |
| --- |
| Description of tasks and responsibilities of the Project Promoter and Partner(s) |
|  |

We certify that the information related to my organisation contained in the application is correct.

We hereby confirm that we agree to participate in the project activities of the partnership, as stated in the project application submitted by the above mentioned Project Promoter on the occasion of the relevant Call, and that we accept all the provisions affecting the role of the Project Promoter and the Project Partner(s).

As for the organisation of the project cooperation and the role of the Project Partner, involvement in accordance with the respective project application and as described above is expected.

Signature of the Project Promoter[[2]](#footnote-2): Signature of the Project Partner[[3]](#footnote-3):

Date and place: Date and place:

Stamp of the Project Promoter (if relevant): Stamp of the Project Partner (if relevant):

1. Delete as appropriate. [↑](#footnote-ref-1)
2. Legal representative or contact person [↑](#footnote-ref-2)
3. Legal representative or contact person [↑](#footnote-ref-3)