

<b>A. Grant Application Form – EEA grants 2014-2021</b>			
Programme:	<b>CZ-Education</b>	Call:	<b>2018</b>
Programme outcome:	<b>Improved skills and competences of students, staff and other educational experts at all levels of education (mobility)</b>		
Type of project:	<b>MOBILITY PROJECTS</b>		
Activity:	<input type="checkbox"/> Mobility of staff of higher education institutions <input type="checkbox"/> Mobility of students in higher education <input type="checkbox"/> Mobility of students in secondary education <input type="checkbox"/> Mobility of staff other than higher education		
Programme Output(s): <input type="checkbox"/> Student mobility <input type="checkbox"/> Staff mobility			
Project Title:		Project Title in Czech:	
Project start date: 1.8.2019		Project Duration:	13 months
Project End Date: 31.8.2020			
Sector Codes:			
<input type="checkbox"/> Education policy and administrative management		<input type="checkbox"/> Education sector staff training	
<input type="checkbox"/> Primary education	<input type="checkbox"/> Early childhood education	<input type="checkbox"/> Secondary education	
<input type="checkbox"/> Vocational training		<input type="checkbox"/> Higher education	

## B. Participating organisations

<b>B.1.1 Applicant Organisation</b>	
Full legal name:	ECHE (if applicant is HEI):
Registration Number (IČ):	
Department:	
Address:	City:                      Post Code:
Country:	Region:
Data Box ID:	VAT number:
Webpage:	
Type of Organisation:	<input type="checkbox"/> pre-primary, primary, <input type="checkbox"/> secondary, <input type="checkbox"/> higher education institution, <input type="checkbox"/> VET institution, <input type="checkbox"/> company, <input type="checkbox"/> NGO, <input type="checkbox"/> public, <input type="checkbox"/> other
Is your organisation a public body?	YES/ NO
Is your organisation a non-profit?	YES/ NO

### B.1.2 Background and Experience

Please briefly present your organisation.

What are the activities and experience of your organisation in the areas relevant for this project?

Please give information on the key staff/persons involved in this project.

Please indicate projects you have realized within the last 3 years with support of EU programmes or EEA/Norway Grants. Please specify project periods in years e.g. 2015-2016), programme and project title.

Year	Programme	Project title

### B.1.3 Legal Representative

Title:	Gender: Female/Male
First Name:	Family Name:
Position:	Email:

### B.1.4 Contact person

Title:	Gender: Female/Male
First Name:	Family Name:
Position:	Department:
Email:	Telephone:

### B.2.1 Partner Organisation

Full legal name:	ECHE (if applicant is HEI):	
Registration Number (IČ):		
Department:		
Address:	City:	Post Code:
Country:	Region:	
VAT number:		
Webpage:		
Type of Organisation:	<input type="checkbox"/> pre-primary, primary, <input type="checkbox"/> secondary, <input type="checkbox"/> higher education institution, <input type="checkbox"/> VET institution, <input type="checkbox"/> company, <input type="checkbox"/> NGO, <input type="checkbox"/> public, <input type="checkbox"/> other	
Is your organisation a public body?	YES/ NO	
Is your organisation a non-profit?	YES/ NO	

## B.2.2 Background and Experience

Please briefly present a partner organisation.

What are the activities and experience of the partner organisation in the areas relevant for this project?

### B.2.3 Legal Representative

Title:	Gender: Female/Male
First Name:	Family Name:
Position:	Email:

### B.2.4 Contact person

Title:	Gender: Female/Male
First Name:	Family Name:
Position:	Department:
Email:	Telephone:

Possibility to add more partner institutions.

## C. Description of the project

C.1 Why do you want to carry out this project? What are the project objectives? Please explain the relevance of your project to the needs and objectives of participating organisations.

C.2 How does your project contribute to the Programme objectives: How does your project strengthen bilateral relations with the Donor states? How does your project contribute to the Programme outcome indicators and priorities?

C.3 Please describe the tasks and responsibilities of each partner. What procedures/control mechanism will you implement to ensure smooth cooperation and communication between partners during its preparation and implementation:

C.3.1 administrative arrangements, communication, distribution the EEA grant among partners

C.3.2 selection of participants and/or involving participants in the mobility, learning agreements/ mobility agreements, recognition and validation of participants' learning outcomes (e.g. ECTS, Europass, ECVET)

C.3.3 preparation offered to participants (e.g. task-related, intercultural, linguistic, risk-prevention etc.)? Who will provide such preparatory activities?

C.3.4 practical and logistic matters of each planned activity (e.g. travel, accommodation, insurance, safety and protection of participants, mentoring and support, etc.)

C.4 If there are participants from disadvantaged groups (i.e. with disabilities and physical or social disadvantages) please give information about their profile/background. If applicable, please explain the need for accompanying persons.

C.5 Please describe expected impact(s) of your project. How will you evaluate the project outcome? Do you plan to continue institutional cooperation with donor states partner(s) after the end of the project?

#### **D. Project target groups**

What target groups do you address in your project? Please identify the needs of the target groups and describe how the target groups will benefit from your project.

Which learning outcomes (i.e. knowledge, skills, competences and attitudes/behaviours) are to be acquired/improved by participants in mobility activities.

#### **E. Communication plan**

E.1 Please briefly describe at least two information activities (e.g. seminar, presentation, conference, press event) which you will prepare to promote progress, achievements and results in the project.

E.2 Please briefly describe aims, target groups, communication tools, website/webpage, planned activities and its timeframe.

E.3 How will information and communication measures be evaluated?

#### **F. Risk Management**

What are your plans for handling risks associated with the project (e.g. setting up of agreements with partners, learning agreements with participants, delays, budget, conflicts, etc.)?

#### **G. Budget**

Grey fields will be filled in automatically.

Basic Information	Applicant	Partners	Description	Activities	Project Financing	Indicators	Declaration
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Secondary education pupil mobility Add activity

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- HEI staff mobility
- HEI student mobility
- Secondary education pupil mobility
- Staff non HEI mobility

### Activity

Activity No. \*  Type of activity

Type of Activity

Activity Description(Max. Num. of characters: 2000) \*

Receiving Organisation

No. of Participants (without accompaning persons) \*

NO. of accompanying persons \*

Total Duration Excluding Travel (days) \*

Travel Days \*

Recalculate requested grant

### Travel

Sending organization	Country of Sending Organisation	Distance Band Km	No. of Participants	Grant per Participant	Grant Requested	
... No records ...						

### Activity cost

Activity No. \*  Activity

Sending Organisation  Country of Sending Organisation

Distance Band Km

No. of Participants \*  Grant per Participant

Grant Requested

Recalculate requested grant

OK
Storno

### Subsistence

Sending organization	Country of Sending Organisation	Country of Destination	No. of Participants	Type of Participant	Grant per Participant	Grant Requested	
... No records ...							

**Activity cost**

Activity No. \*  Activity

Sending Organisation  Country of Sending Organisation

Country of Destination \*

Type of Participant \*

No. of Participants \*  Grant per Participant

Total Duration Excluding Travel (days)  Travel Days

Grant Requested

**Recalculate requested grant**

Special needs support (additional costs related to participants with special needs)

Sending organization	Country of Sending Organisation	Name	No. of Participants	Description	Justification	Grant Requested
... No records ...						

**Activity cost**

Activity No. \*  Activity

Sending Organisation  Country of Sending Organisation

Country of Destination \*

No. of Participants \*

Description \*

Justification \*

Grant Requested \*

**Recalculate requested grant**

Linguistic support

Sending organization	Country of Sending Organisation	Name	No. of Participants	Grant Requested
... No records ...				

**Activity cost**

Activity No. \*  Activity

Sending Organisation  Country of Sending Organisation

No. of Participants \*

Grant Requested

**Recalculate requested grant**

Exceptional costs (costs to support participants with fewer opportunities)

Sending organization ▲	Country of Sending Organisation	Description	Justification	Grant Requested	
... No records ...					

**Activity cost**

Activity No. \*  Activity

Sending Organisation  Country of Sending Organisation

Description \*

Justification \*

Grant Requested \*

**Recalculate requested grant**

### Organisational support for mobility

Number of Travel Participants  Grant Calculated (in EUR)

### Total Budget Overview

Sending Organisation ▲	Country of the Sending Organisation	Travel	Subsistence	Special needs support	Exceptional costs	Linguistic support	Total (in EUR)
Dům zahraniční spolupráce	Czech Republic	0.00	0.00	0.00	0.00	0.00	0.00
Liechtenstein University	Iceland	0.00	0.00	0.00	0.00	0.00	0.00
		0	0	0	0	0	0

### Project Rates

Total Calculated Grant in EURO

Total Requested Grant in CZK

Grant Rate in CZK

Programme Co-Financing in CZK

## H. Indicators

### H.1.1 Programme indicators – the project contribution to the achievement of the Programme Outcome 1

Name of the indicator	Target (value)
Number of ECTS credits received by the higher education students in mobility projects	fields will be filled in automatically based on Part G- Budget
Number of students from the Beneficiary State participating in exchanges in secondary and higher education	fields will be filled in automatically based on Part G- Budget
Number of students from the Donor States participating in exchanges in secondary and higher education	fields will be filled in automatically based on Part G- Budget
Number of staff and educational experts from the Beneficiary State participating in exchanges	fields will be filled in automatically based on Part G- Budget
Number of staff and educational experts from the Donor States participating in exchanges	fields will be filled in automatically



	based on Part G- Budget
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Please specify any other project indicator(s), which might be relevant for your project.

H.1.2 Project indicators			
Name of the indicator	Target	Unit of measurement (Number/Percentage/Scale)	Description

H.1.3 Project policy markers		
Project Policy Marker	Relevance	Description
<input type="checkbox"/> None <input type="checkbox"/> Gender equality <input type="checkbox"/> Roma inclusion and empowerment <input type="checkbox"/> Social inclusion of vulnerable groups other than Roma <input type="checkbox"/> Anti-discrimination <input type="checkbox"/> Transparency and anti-corruption	<input type="checkbox"/> Relevant <input type="checkbox"/> Fundamental	

## I. Project Summary

Please provide a short summary of your project. Please recall that this section (or a part of it) may be used by DZS or donor programme partners in their publications. Be concise and clear and mention at least the following elements: context/background of project; objectives of your project; number and profile of participants; description of activities; methodology to be used in carrying out the project; a short description of the results and impact envisaged and finally the potential longer term benefits. The summary will be publicly available in case your project is awarded.

Please provide a translation in Czech.

## J. Declaration of Honour

I, the undersigned, certify that the information contained in this application form is correct to the best of my knowledge. I put forward a request of an EEA Financial Mechanism grant as set out in this application form.

I declare that:

- All information contained in this application and annexes, is correct to the best of my knowledge.
- Costs for the same activity will not be covered by two different funding sources, with the exception of the case where complementarity can clearly be proven.

- The organisation I represent has the adequate legal capacity to participate in the Call for proposals.

EITHER

The organisation I represent has financial and operational capacity to complete the proposed action or work programme

OR

The organisation I represent is considered to be a "public body" in the terms defined within the Call and can provide proof, if requested of this status, namely:

It provides learning opportunities and

- Either (a) at least 50% of its annual revenues over the last two years have been received from public sources;

- Or (b) it is controlled by public bodies or their representative

I am authorised by my organisation to sign grant agreements on its behalf.

Certify that the organisation I represent:

- is not bankrupt, being wound up, or having its affairs administered by the courts, has not entered into an arrangement with creditors, has not suspended business activities, is not the subject of proceedings concerning those matters, nor is it in any analogous situation arising from a similar procedure provided for in national legislation or regulations;

- has not been convicted of an offence concerning its professional conduct by a judgment which has the force of 'res judicata';

- has not been guilty of grave professional misconduct proven by any means which the Programme Operator can justify;

- has fulfilled its obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which it is established or those of the country where the grant agreement is to be performed;

- has not been the subject of a judgment which has the force of 'res judicata' for fraud, corruption, involvement in a criminal organisation or any other illegal activity;

I acknowledge that:

The organisation I represent will not be awarded a grant if it finds itself, at the time of the grant award procedure, in contradiction with any of the statements certified above, or in the following situations:

- subject to a conflict of interest (for family, personal or political reason or through national, economic or any other interest shared with an organisation or an individual directly or indirectly involved in the grant award procedure);

- guilty of misrepresentation in supplying the information required by the Programme Operator as a condition of participation in the grant award procedure or has failed to supply this information.

In the event of this application being approved, the Programme Operator has the right to publish the name and address of this organisation, the subject of the grant and the amount awarded and the rate of funding.

I commit my organisation and the other partner organisations herein, to take part upon request in dissemination and exploitation activities conducted by Programme Operator or other institutions involved in the EEA Financial Mechanism where the participation of individual participants may also be required.

I acknowledge that administrative and financial penalties may be imposed on the organisation I represent if it is guilty of misrepresentation or is found to have seriously failed to meet its contractual obligations under a previous contract or grant award procedure.

Place:

Date (dd-mm-yyyy):

Name of the applicant organisation:

Name of legal representative:

Signature:

SAMPLE