

A. Grant Application Form – EEA grants 2014-2021			
Programme:	CZ-Education	Call:	2019
Programme outcome:	Increased inclusion of disadvantaged groups including the Roma population (inclusive education)		
Type of project:	INCLUSIVE EDUCATION PROJECTS		
Activity:	Joint projects aim at developing competences and classroom-based skills of education professionals and multipliers		
Project Title:		Project Title in Czech:	
Project start date: 1.9.2019	Project Duration:	<input type="checkbox"/> 12	<input type="checkbox"/> 24
Project End Date:			
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.1.1 Applicant Organisation

Full legal name:	
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:	
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
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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:

If your project includes a partner from other Beneficiary state, please tick this box and add information about the partner organisation(s). Please note that a partner from other Beneficiary state may participate in your project only as non-financed partner.

C. Description of the project

C.1 Why do you want to carry out this project? Make sure you explain i) the relevance of your project to the needs and objectives of participating organisations and ii) describe what is innovative about your project.

C.2 Define project objectives and describe outputs you want to achieve. How does your project address topics of inclusive education and/or Roma inclusion?

C.3 Please explain how the planned activities will lead to the achievement of the project's objectives and programme indicators. Please provide the timetable and methodology of planned activities.

C.4 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?

C.5 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 both preparation and implementation? What criteria will be used to distribute the EEA grant among partners?

C.6 Please describe expected impact(s) of your project. How will you evaluate project outcome? How will you ensure that the project's results will remain available and could be used by others? 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.

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. delays, budget, conflicts, etc.)?

G. Budget

Grey fields will be filled in automatically.

Project management and implementation support			
Organisation	Role of Organisation	Country	Grant Requested
		Total Grant Requested	

Transnational Project Meetings					
Sending Organisation	Country of the Sending Organisation	Total NO. Of participants	Distance Band km	Grant per Participant	Grant Requested
			<input type="checkbox"/> 0 - 99, <input type="checkbox"/> 100 - 1999, <input type="checkbox"/> 2000 and more		
			<input type="checkbox"/> 0 - 99, <input type="checkbox"/> 100 - 1999, <input type="checkbox"/> 2000 and more		
				Total	

Transnational project meetings: How many meetings do you plan? Who will participate in those meetings? Where will particular meetings take place? What is the goal of the particular meetings?

Exceptional costs (contribution to real cost related to subcontracting or purchase of goods and services)				
Organisation	Country of the Organisation	Description of Cost Item	Justification	Grant Requested
				up to 100% of eligible cost, maximum of 20 000 EUR per project
				up to 100% of eligible cost, maximum of 20 000 EUR per project
			Total	

Intellectual Outputs	
Output Identification	Output 1
Output Title	
Output Description	Please briefly describe the output, type of output, elements of innovation, expected impact and transferability potential. Please describe which topics do you address.
Output Work	Please briefly describe the division of work, the tasks leading to the production of the intellectual output, the applied methodology and the role of promoter and partner(s).
Start Date	
End Date	

Cost of staff assigned to the project						
Output Identification	Organisation of the Staff	Country of the Organisation	Category of Staff	No. of Working Days	Grant per Days	Grant Requested
			<input type="checkbox"/> manager <input type="checkbox"/> other (teacher, trainer, researcher) <input type="checkbox"/> technician <input type="checkbox"/> administrative staff			
			<input type="checkbox"/> manager <input type="checkbox"/> other (teacher, trainer, researcher) <input type="checkbox"/> technician <input type="checkbox"/> administrative staff			
Total					Total	

Multiplier events	
Event Identification	Event 1
Event Title	
Country of Venue	<input type="checkbox"/> Czech Republic <input type="checkbox"/> Iceland <input type="checkbox"/> Liechtenstein <input type="checkbox"/> Norway
Event Description	Please briefly describe the event and which intellectual output is covered with this event. What is the expected impact of this event?
Start Date	
End Date	

Multiplier Events Costs								
Event Identification	Organisation	Country	Country of Venue	No. of Local Participants	Grant per Local Participant	No. Of International Participants	Grant per International Participant	Grant Requested
			<input type="checkbox"/> Czech Republic <input type="checkbox"/> Iceland <input type="checkbox"/> Liechtenstein <input type="checkbox"/> Norway		100 Eur		200 Eur	
			<input type="checkbox"/> Czech Republic <input type="checkbox"/> Iceland <input type="checkbox"/> Liechtenstein <input type="checkbox"/> Norway		100 Eur		200 Eur	
			Total		Total		Total	

Transnational teaching or training activities	
Activity No.	
Type of Activity	<input type="checkbox"/> inclusive education <input type="checkbox"/> Roma inclusion
Activity Description	<i>Please briefly describe the activity. What is the profile of participants? Please describe which topics do you address? What are the expected benefits for the participants? Please indicate the arrangements for the recognition of the activities? Please indicate the beginning of the activity (at least month).</i>
Receiving organisation	
Country of Destination	
No. of Participants	<i>Participant of all partners (including from country of venue)</i>
Duration per Participant Excluding Travel (days)	
Travel Days	

TRAVEL						
Activity No.	Sending Organisation	Country of Sending Organisation	Distance Band Km	Travel Grant per Participant	No. of Participants	Grant Requested
			<input type="checkbox"/> 0 - 9, <input type="checkbox"/> 10 - 99, <input type="checkbox"/> 100 - 499, <input type="checkbox"/> 500 - 1999, <input type="checkbox"/> 2000 - 2999, <input type="checkbox"/> 3000 - 3999, <input type="checkbox"/> 4000 - 7999			
			<input type="checkbox"/> 0 - 9, <input type="checkbox"/> 10 - 99, <input type="checkbox"/> 100 - 499, <input type="checkbox"/> 500 - 1999, <input type="checkbox"/> 2000 - 2999, <input type="checkbox"/> 3000 - 3999, <input type="checkbox"/> 4000 - 7999			
					Total	

SUBSISTENCE								
Activity No.	Sending Organisation	Country of Sending Organisation	Country of Destination	Participant	Grant per Participant per Day	No. of Participants	Total Duration Including Travel (Days)	Grant Requested
			<input type="checkbox"/> Czech Republic <input type="checkbox"/> Iceland <input type="checkbox"/> Liechtenstein <input type="checkbox"/> Norway	<input type="checkbox"/> Learner <input type="checkbox"/> Staff and Professionals				
			<input type="checkbox"/> Czech Republic <input type="checkbox"/> Iceland <input type="checkbox"/> Liechtenstein <input type="checkbox"/> Norway	<input type="checkbox"/> Learner <input type="checkbox"/> Staff and Professionals				
							Total	

Special needs support (additional costs related to participants with special needs)						
Activity No.	Sending Organisation	Country of Organisation	No. of Participants with Special Needs	Description of Cost Item	Justification	Grant Requested
						<i>up to 100% of eligible cost</i>
						<i>up to 100% of eligible cost</i>

Total Budget Overview										
Organisation	Country of the Organisation	Project management and implementation support	Transnational Project Meetings	Exceptional Cost	Cost of staff (Intellectual Outputs)	Multiplier Events	Travel	Subsistence	Special needs support	Total Requested Grant
	Total									

Project Rates	
Total Calculated Grant in EURO	
Total Calculated Grant in CZK	
Project Co-Financing in CZK	
EEA Grant in CZK	
Programme Co-Financing in CZK	
Total Requested Grant in CZK	

H. Indicators

H.1.1 Programme indicators – the project contribution to the achievement of the Programme Outcome 4	
Name of the indicator	Target (value)
Number of students benefitting from improved skills of the teachers	Fill in the number
Number of teachers/multipliers trained in methodology of inclusive education	Fill in the number
Number of teachers/multipliers trained in methodology contributing to Roma inclusion	Fill in the number

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.