



A. Grant Application	on Form – EEA grants 2014-2021
Programme	CZ - Education
Call	Mobility Projects – Call 2
Programme Outcome	Improved skills and competences of students, staff and other educational experts at all levels of education (mobility)
Type of projects	Mobility projects
Application number	EHP-CZ-MOP-2-xxx
Project Title	EEA Grants: Mobility project
Project Title in Czech	Fondy EHP: Projekty mobilit
Project start date	01/08/2020
Project duration in months	13
Project End Date	31/08/2021
Sector Codes	

B. Participating organisations							
B.1.1 Applicant Orga	3.1.1 Applicant Organisation						
Full legal name							
ECHE (if applicant is HEI)							
Registration Number (IČ)							
Department							
Address							
City							
Post Code							
Country	Česká republika						
Region							
Data Box ID							
VAT number							
Webpage							
Type of Organisation							
Is your organization a public body?							
Is your							





organization a	
non-profit?	

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 from	Year to	Programme	Project title	

B.1.3 Legal Representatives

B.1.4 Contact persons								
Title Gender First Name Family Name Position Departement Email						Email	Telephone	

B.2.1 Partner Organis	sation
Full legal name	
ECHE (if applicant is HEI)	
Registration Number (IČ)	
Department	
Address	
City	
Post Code	
Country	Norway
Region	
VAT number	
Webpage	
Type of Organisation	
If other please specify	
Is your	





organization a public body?	
Is your organization a non-profit?	

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 Representatives							
Title	Gender	First Name	Family Name	Position	Departement	Email	Telephone

B.2.4 Contact persons							
Title Gender First Name Family Name Position Departement Email Telephone							

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

- D.1 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.
- D.2 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, webside/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

G.1 Organisational support for mobility				
Number of Travel Participants	2	Grant Calculated (in EUR)		700.00

G.2 Budget Over	view						
Sending Organisation	Country of the Sending Organisation	Travel	Subsistence	Special needs support	Exceptional costs	Linguistic support	Total (in EUR)
Dům zahraniční spolupráce	Czech Republic	275.00	2200.00	1000.00	0.00	0.00	3475.00
Project Partner	Norway	275.00	3333.33	1000.00	500.00	150.00	5258.33
Total		550.00	5533.33	2000.00	500.00	150.00	8733.33

G.3 Grant Requested	
Total Calculated Grant in EURO	9 433
Total Requested Grant in CZK	240 541
EEA Grant in CZK	204 459
Programme Co-Financing in CZK	36 082

G.4 Activity					
Activity No.	1	Type of activity	HEI student mobility		
Type of Activity	Study period abroad				
Activity Description					
Receiving Organisation	Dům zahraniční spolupráce	Number of Participants	1		
Total number of	1	Duration per Participant	100		





planned ECTS credits	Including Travel Days	

G.4.1 Travel						
Sending Organization	Country of Sending Organization	Distance Band in Km	No. of Participants	Grant pe	er Participant in	Grant Calculated in EUR
Project Partner	Norway	500-1999	1		275.00	275.00

G.4.2 Subsistence					
Sending Organization	Country of Sending Organization	Country of Destination	No. of Participants	Grant per Participant in EUR	Grant Calculated in EUR
Project Partner	Norway	Czech Republic	1	3 333.33	3 333.33

G.4.3 Special needs support (additional costs related to participants with special needs)							
Sending Organization	Country of Sending Organization	Country of Destination	No. of Participants	Description	Justification	Grant Requested in EUR	
Project Partner	Norway	Czech Republic	1			1 000.00	

G.4.4 Linguistic support			
Sending Organization	Country of Sending Organization	No. of Participants	Grant Calculated in EUR
Project Partner	Norway	1	150.00

G.4.5 Exceptional costs (costs to support participants with fewer opportunities)					
Sending Organization	Country of Sending Organization	Description	Justification	Grant Requested in EUR	
Project Partner	Norway			500.00	

G.4 Activity





Activity No.	2	Type of activity	HEI staff mobility
Type of Activity	Staff mobility for training		
Activity Description			
Receiving Organisation	Project Partner	Number of Participants	1
Duration per Participant Excluding Travel (days)	10	Travel Days	2

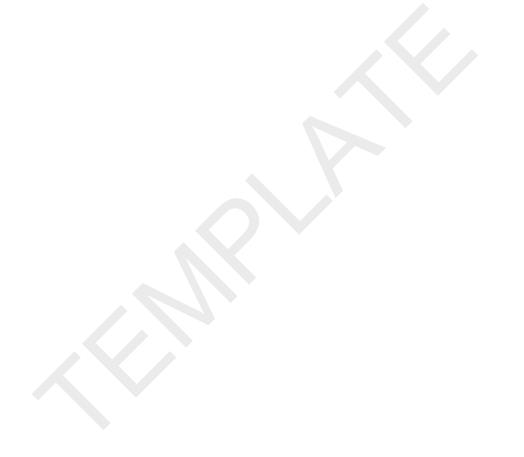
G.4.1 Travel						
Sending Organization	Country of Sending Organization	Distance Band in Km	No. of Participants	Grant per Participant in EUR	Grant Calculated in EUR	
Dům zahraniční spolupráce	Czech Republic	500-1999	1	275.00	275.00	

G.4.2 Subsistence						
Sending Organization	Country of Sending Organization	Country of Destination	No. of Participants	Grant per Participant in EUR	Grant Calculated in EUR	
Dům zahraniční spolupráce	Czech Republic	Norway	1	2 200.00	2 200.00	

G.4.3 Special needs support (additional costs related to participants with special needs)							
Sending Organization	Country of Sending Organization	Country of Destination	No. of Participants	Description	Justification	Grant Requested in EUR	
Dům zahraniční spolupráce	Czech Republic	Norway	1			1 000.00	











H. Indicators		
H.1.1 Programme indicators		
Name of the indicator	Target	Unit of measurement
Number of ECTS credits received by the higher education students in mobility projects		Number
Number of students from the Beneficiary State participating in exchanges in secondary and higher education		Number
Number of students from the Donor States participating in exchanges in secondary and higher education		Number
Number of staff and educational experts from the Beneficiary State participating in exchanges		Number
Number of staff and educational experts from the Donor States participating in exchanges		Number

H.1.2 Project indicators				
Name of the indicator	Target	Unit of measurement	Description	
		Number		

H.1.3 Project policy markers			
No policy markers			
Project policy marker	Relevance	Description	

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.

Name and surname	Date	Signature
	N	