**Application form**

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| Identification of the promoter | | | | | | |
|  | | | | | | |
| A.1. Details of the promoter | | | | | | |
| Promoter’s Legal Name (national language) | |  | | | | |
| Promoter’s Legal Name (latin characters) | |  | | | | |
| Acronym, if applicable | |  | | | | |
| National ID Number,  if applicable | |  | | | | |
| Department, if applicable | |  | | | | |
| Address  City | |  | | | | |
|  | | Postcode |  | |
| Region | |  | | Country |  | |
| Email | |  | | Website |  | |
| Telephone | |  | | Telefax |  | |
|  | | | | | | |
| A.2. Person authorised to legally commit the promoter (legal representative) | | | | | | |
| Family name *(Ms/Mr)* | |  | | First name |  | |
| Position/function | |  | | | | |
| Address  City | |  | | | | |
|  | | Postcode |  | |
| Region | |  | | Country |  | |
| Email | |  | | | | |
| Telephone | |  | | Telefax |  | |
|  | | | | | | |
| A.3. Person responsible for the implementation of the action (contact person) | | | | | | |
| Family name *(Ms/Mr)* | |  | | First name |  | |
| Position/function | |  | | | | |
| Address  City | |  | | | | |
|  | | Postcode |  | |
| Region | |  | | Country |  | |
| Email | |  | | | | |
| Telephone | |  | | Telefax |  | |
|  | | | | | | |
| B.1. Profile of the partner | | | | | | |
| Type and status | Public body  Private body | | | | | |
|  | Non profit/non governmental organisation  Informal group of young people  Body active at European level in the youth field (ENGO)  Other – please specify: ………………………… | | | | | |
| Activity level | Local  Regional  National  European International | | | | | |
| B.2. Objectives and activities of the promoter | | | | | | |
| *Please provide a short description of your organisation/group (usual activities, affiliations, etc) in relation to the field covered by the project.* | | | | | | |
|  | | | | | | |
| **B.3. Expert involved in the project (VERY IMPORTANT TO COMPLETE)** | | | | | | |
| *Please provide a short description of the person who will attend the first seminar or the project as expert (name, position, institution, profile, etc.). The identity of this person could be changed after the approval of the project in case of unavailability to attend the seminar of the one previously invited.* | | | | | | |
|  | | | | | | |
| B.3. Please give information about any type of Community grant your organisation/group has received/ applied for in the last financial year. (add more rows if needed) | | | | | | |
| Programme or Initiative | | Identification/contract number | Contracting promoter | | | Title of the Project |
|  | |  |  | | |  |
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| C.1. Travel costs | | | |
| Airport of departure | Airport of Arrival  (choose one) | Transports used | Aproximate travel costs per person (100%) |
|  | Madrid/Bilbao/Zaragoza |  |  |