

A. Grant Application Form – EEA grants 2014-2021

Programme	CZ - Education
Call	Inclusive Education Projects - Call 2
Programme Outcome	Increased inclusion of disadvantaged groups including the Roma population (inclusive education)
Type of projects	Inclusive education projects
Application number	EHP-CZ-IN-2-xxx
Project Title	
Project Title in Czech	
Project start date	01/08/2020
Project duration in months	
Project End Date	
Sector Codes	

B. Participating organisations

B.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	
If other please specify	
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	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	

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	Department	Email	Telephone

B.2.4 Contact persons

Title	Gender	First Name	Family Name	Position	Department	Email	Telephone

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. Activities

G.1 Intellectual Output

Identification	1	
Title		
Description		
Work		

G.1.1 Costs of staff assigned to the project

Organization	Country	Category of Staff	No. of Working Days	Grant per Staff per Day (in EUR)	Grant Calculated (in EUR)

G.2 Multiplier Event

Identification	1	
Title		
Description		

G.2.1 Multiplier Events Costs

Organization	Country	Country of Venue	No. of Local Participants	Grant per Local Participant (in EUR)	No. of International Participants	Grant per International Participant (in EUR)	Grant Calculated (in EUR)

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G.3 Activity			
Activity No.	1	Activity	Transnational teaching or training
Activity Description			
Receiving Organisation		Country of Destination	
Number of Participants			
Duration per Participant Excluding Travel (days)		Travel Days	

G.3.1 Travel					
Sending Organization	Country of Sending Organization	Distance Band in Km	No. of Participants	Grant per Participant in EUR	Grant Calculated in EUR

G.3.2 Subsistence					
Sending Organization	Country of Sending Organization	Country of Destination	No. of Participants	Grant per Participant in EUR	Grant Calculated in EUR

G.3.3 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

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H. Project Financing

H.1 Project management and implementation support

Organisation	Role of Organisation	Country of the Organisation	Grant Calculated (in EUR)
Total			0.00

H.2 Transnational Project Meetings

Sending Organisation	Country of the Sending Organisation	Distance Band km	No. of Participants	Grant per Participant (in EUR)	Grant Calculated (in EUR)
Total					0.00

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?

H.3 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 Calculated (in EUR)
Total				0.00

H.4 Total Budget Overview									
Sending Organisation	Country of the Sending Organisation	Transnational Project Meetings	Exceptional Cost	Cost of staff (Intellectual Outputs)	Multiplier Events	Travel	Subsistence	Special needs support	Total (in EUR)
Total									

H.5 Project Rates	
Is your organization a NGO?	
Total Calculated Grant in EURO	
Total Calculated Grant in CZK	
Project Co-Financing in CZK	
Total Requested Grant in CZK	
EEA Grant in CZK	
Programme Co-Financing in CZK	

I. Indicators

I.1.1 Programme indicators

Name of the indicator	Target	Unit of measurement
Number of students benefitting from improved skills of the teachers		Number
Number of teachers/multipliers trained in methodology of inclusive education		Number
Number of teachers/multipliers trained in methodology contributing to Roma inclusion		Number

I.1.2 Project indicators

Name of the indicator	Target	Unit of measurement	Description

I.1.3 Project policy markers

No policy markers	No	
Project policy marker	Relevance	Description

J. 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.

K. Declaration of Honour

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:

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