|  |
| --- |
| DISCLAIMER  This document represents a template of an application form. It must not be used for real applications to a National Agency.  Please also note that the sections and questions presented below may ultimately differ from the electronic application form made available to applicant organisations.  We strongly advice check the questions carefully when filling in real application. |

# Guidelines

Please have a look at the following information about the application for KA105 - Youth mobility :

* Mandatory fields are marked in red. They need to be filled in before you are able to submit the form.
* Once all mandatory fields are filled in and the validation rules in a section are observed, sections will be marked with the following sign: . If a section is marked with this sign:  this means that either there is some information missing or not all rules have been respected. Most individual questions will be marked in the same way to make it easy to identify and fix the issues.
* The form is automatically saved every 2 seconds.
* After closing the form, you will be able to access it under the 'My Applications' tab on the homepage.
* Once the form is submitted, you will be able to re-open and re-submit it until the submission deadline has expired. You can re-open the form from the 'My Applications' tab on the homepage. Under the Submission Summary page, you can access information about all submissions you made with this application form.
* You can find more information [<https://webgate.ec.europa.eu/fpfis/wikis/display/NAITDOC/Web+Application+Forms+Guidelines>]
* If you have any additional questions or if you encounter a technical problem, please contact your **National Agency**. You can find their contact details [here](http://ec.europa.eu/programmes/erasmus-plus/contact). [Hyperlink][ <http://ec.europa.eu/programmes/erasmus-plus/contact>]

This application form consists of the following main sections:

* **Context:** This section asks for general information about your project proposal and about the National Agency that will receive, assess and decide on the selection of your proposal.
* **Participating Organisations:** This section asks for information about the applicant organisation and about other organisations involved in the project as partners.  
  All organisations included in the application, whether they act as applicant or partner, need to be registered in order to receive a Participant Identification Code (PIC) through the [Participant Portal](http://ec.europa.eu/education/participants/portal). <http://ec.europa.eu/education/participants/portal>
* The PIC is a unique identifier for the organisation within the whole Erasmus+ Programme. It should be requested only once per organisation and used in all applications for all Erasmus+ actions and calls. Organisations that have previously registered for a PIC should not register again. If an organisation needs to change some of the information linked to the PIC, this can be done through the Participant Portal.
* **Project Description:** This section asks for information about the objectives and topics of the project.
* **Participants:** This section asks for information about the participants of the project.
* **Preparation:** This section asks for information on what will be done in preparation for each planned activity.
* **Activities:** This section asks for information about the main activities of the project, including the amount of EU grant that you are requesting to implement them.
* **Follow-up:** This section asks for information about the impact of the project as well as about the dissemination and evaluation activities you will carry out.
* **Budget Summary:** This section will provide an overview of the budget of your project and the EU grant you request.
* **Project Summary:** In this section you will be asked to provide a summary of your project.
* **Annexes:** In this section, you will need to attach relevant documents needed for the completion of your application.
* **Checklist:** This section will help you double-check if your application is ready for submission.

# Context

|  |  |
| --- | --- |
| Programme | Erasmus+ |
| Key Action | Learning Mobility of Individuals |
| Action | Mobility of Learners and Staff |
| Action Type | KA105 - Youth mobility |
| Call | 2018 |
| Round | 1 |
| Deadline for Submission | 1 February, 2018 12.00 am Brussels, Belgium Time |
| Language used to fill in the form |  |
| Project Title |  |
| Project Title in English |  |
| Project Acronym |  |
| Project Start Date (dd-mm-yyyy) |  |
| Project Total Duration | from 3 to 24 months |
| Project End Date (dd-mm-yyyy) |  |

|  |  |
| --- | --- |
| National Agency of the Applicant Organisation |  |

For further details about the available Erasmus+ National Agencies, please consult the following page:

<https://ec.europa.eu/programmes/erasmus-plus/contact>

# Participating Organisations

Please note, the PIC code is a unique identifier for the organisation within the whole Erasmus+ Programme. It should be requested only once per organisation and used in all applications for all Erasmus+ actions and calls. Organisations that have previously registered for a PIC should not register again. If an organisation needs to change some of the information linked to the PIC, this can be done through the Participant Portal. <http://ec.europa.eu/education/participants/portal>

## Applicant Organisation

### Applicant Organisation Details

|  |  |
| --- | --- |
| Role | Applicant Organisation |
| PIC |  |
| Legal name (National language) | Prefilled after entered the PIC |
| Legal name | Prefilled after entered the PIC |
| Acronym | Prefilled after entered the PIC |
| National ID (if applicable) | Prefilled after entered the PIC |
| Department (if applicable) | Prefilled after entered the PIC |
| Address | Prefilled after entered the PIC |
| Country | Prefilled after entered the PIC |
| P.O. Box | Prefilled after entered the PIC |
| Postal Code | Prefilled after entered the PIC |
| CEDEX | Prefilled after entered the PIC |
| City | Prefilled after entered the PIC |
| Website | Prefilled after entered the PIC |
| Email |  |
| Telephone | Prefilled after entered the PIC |
| Fax | Prefilled after entered the PIC |

### Background and Experience

[Available only for applicant organisation and consortium members]

Please briefly present the organisation.

|  |
| --- |
| [Max 5000 characters] |

[Available only for applicant organisation and consortium members]

What are the activities and experience of the organization in the areas relevant for this application?

|  |
| --- |
| [Max 5000 characters] |

Please give information on the key staff/persons involved in this application and on the competence and previous experience that they will bring to the project.

|  |
| --- |
| *[Max 5000 characters]* |

Have you applied for/received a grant from any European Union programme in the 12 months preceding this application?

|  |
| --- |
| Yes/No |

[The next section is available if the answer to the above question is “Yes”.]

Please indicate:

|  |  |
| --- | --- |
| EU Programme |  |
| Year |  |
| Project Identification or Contract Number |  |
| Applicant/Beneficiary Name |  |

### Associated Person (Organisation Name)

|  |  |
| --- | --- |
| Role | LR – Legal Representative  CP – Contact Person |
| Preferred Contact |  |
| Title |  |
| Gender |  |
| First Name |  |
| Family Name |  |
| Department |  |
| Position |  |
| Email |  |
| Telephone |  |

Same Address as Organisation

|  |  |
| --- | --- |
| Address |  |
| Country |  |
| P.O. Box |  |
| Post Code |  |
| CEDEX |  |
| City |  |

## Partner Organisation

|  |  |
| --- | --- |
| Role | Partner organisation |
| PIC |  |
| Legal name (National language) | Prefilled after entered the PIC |
| Legal name | Prefilled after entered the PIC |
| Acronym | Prefilled after entered the PIC |
| National ID (if applicable) | Prefilled after entered the PIC |
| Department (if applicable) | Prefilled after entered the PIC |
| Address | Prefilled after entered the PIC |
| Country | Prefilled after entered the PIC |
| P.O. Box | Prefilled after entered the PIC |
| Postal Code | Prefilled after entered the PIC |
| CEDEX | Prefilled after entered the PIC |
| City | Prefilled after entered the PIC |
| Website | Prefilled after entered the PIC |
| Email |  |
| Telephone | Prefilled after entered the PIC |
| Fax | Prefilled after entered the PIC |

### Profile

|  |  |
| --- | --- |
| Type of Organisation |  |
| Is the organisation a public body? | Prefilled after entered the PIC |
| Is the organisation a non-profit? | Prefilled after entered the PIC |

### Background and Experience

Please briefly present the partner organisation.

|  |
| --- |
| [Max 5000 characters] |

### Associated Person (Organisation Name)

|  |  |
| --- | --- |
| Role | LR – Legal Representative  CP – Contact Person |
| Preferred Contact |  |
| Title |  |
| Gender |  |
| First Name |  |
| Family Name |  |
| Department |  |
| Position |  |
| Email |  |
| Telephone |  |

Same Address as Organisation

|  |  |
| --- | --- |
| Address |  |
| Country |  |
| P.O. Box |  |
| Post Code |  |
| CEDEX |  |
| City |  |

# Project Description

Why do you want to carry out this project?

What are its objectives?

How does it link to the objectives of the Erasmus+ programme and this specific key action?

What are the issues and needs that you are seeking to address through this project?

|  |
| --- |
| [Max 5000 characters] |

How did you choose your project partners?

What experiences and competences will they bring to the project?

Please also describe how the project meets the needs and objectives of your partners.

|  |
| --- |
| [Max 5000 characters] |

Please select up to three topics addressed by your project.

|  |
| --- |
|  |

# Participants

## Participants Profile

Please describe for each planned activity the background and needs of the participants involved and how these participants have been or will be selected. If there are participants with fewer opportunities please give information about their profile/background.

If you are applying for Youth Exchanges, please also describe the role and involvement of the participants in all phases of the project.

|  |
| --- |
| [Max 5000 characters] |

Please provide for each planned activity, general information on the age of participants and describe how you will ensure gender balance in the main activities carried out in your project.

|  |
| --- |
| [Max 5000 characters] |

## Participants with Fewer Opportunities

Does your project involve participants facing situations that make their participation in the activities more difficult?

|  |
| --- |
| YES/NO |

[IF YES]

Which types of situations are these participants facing?

|  |
| --- |
|  |

If any, please explain the particular measures (accompanying person, reinforced preparation etc.) you will put in place to cater for the specific needs of these participants and/or to support their participation.

|  |
| --- |
| [Max 5000 characters] |

## Learning Outcomes

Which learning outcomes or competences (i.e. knowledge, skills and attitudes/behaviours) are to be acquired/improved by participants in each planned activity of your project?

|  |
| --- |
| [Max 5000 characters] |

The Erasmus+ Programme promotes the use of instruments/certificates like Europass, ECVET and Youthpass to validate the competences acquired by the participants during their experiences abroad. Will your project make use of such European instruments/certificates?

If so, please select up to three.

|  |
| --- |
|  |

[+][-]

Are you planning to use any national instrument/certificate?

|  |
| --- |
| [YES/NO] |

[IF YES]

Which one?

|  |
| --- |
| [Max 5000 characters] |

How will you use the European/national instrument(s)/certificate(s) selected, if any?

How will you ensure an awareness and reflection of the participants on their learning process and competences developed in the project?

Please remember to include the methods that support reflection and documentation of the learning outcomes in the daily timetable of each activity.

|  |
| --- |
| [Max 5000 characters] |

Preparation

Practical Arrangements

How will the practical and logistic matters of each planned activity be addressed (e.g. travel, accommodation, insurance, safety and protection of participants, visa, social security, mentoring and support, preparatory meetings with partners etc.)?

|  |
| --- |
| [Max 5000 characters] |

Project Management

How will you address quality and management issues (e.g. setting up of agreements with partners, learning agreements with participants, etc.)?

|  |
| --- |
| [Max 5000 characters] |

Preparation of Participants

Which kind of preparation will be offered to participants (e.g. task-related, intercultural, linguistic, risk-prevention etc.)?

Who will provide such preparatory activities?

|  |
| --- |
| [Max 5000 characters] |

# Activities

## Main activities

Please explain the context and objectives of the activities you are planning and in which way they meet the objectives of the project.

|  |
| --- |
| [Max 5000 characters] |

What are the basic elements of those activities?

For each activity, remember to describe at the very least all of the following: type of activity, venue(s), planned dates, working methods used, countries involved and the role of each project partner in the activity.

Please also provide information on the involvement of participants from the country of the receiving organisation even if no funding is requested for them.

|  |
| --- |
| [Max 5000 characters] |

If applicable, how do you intend to cooperate and communicate with your project partners and other relevant stakeholders?

|  |
| --- |
| [Max 5000 characters] |

## List of Activities

Please enter the different mobility activities you intend to implement in your project.

|  |  |
| --- | --- |
| Id | A1 |
| Activity Type |  |
| Activity Title |  |

Flows

|  |  |
| --- | --- |
| Activity Id | [Generated by the system] |
| Id | [Generated by the system] |
| Group |  |
| Country of Origin |  |
| Country of Destination |  |
| City of Venue |  |
| Distance Band |  |
| Start Date |  |
| End Date |  |
| Total Duration Excluding Travel  (days) |  |
| Travel Days |  |
| Total Duration Including Travel  (days) |  |
| Total No. of Participants |  |
| Out of which: |  |
| No. of Participants with Special Needs *(Out of Total No. of Participants)* |  |
| No. of Participants with Fewer Opportunities *(Out of Total No. of Participants)* |  |
| No. of Accompanying Persons *(Out of Total No. of Participants)* |  |
| No. of Group Leaders/Trainers/Facilitators *(Out of Total No. of Participants)* |  |

Flows summary

|  |  |
| --- | --- |
| Flow Id. | [Generated by the system] |
| Country of Origin | [Prefilled Read Only] |
| Country of Destination | [Prefilled Read Only] |
| City of Venue | [Prefilled Read Only] |
| Start Date | [Prefilled Read Only] |
| End Date | [Prefilled Read Only] |
| Total Duration Excluding Travel (days) | [Prefilled Read Only] |
| Total Duration Including Travel (days) | [Prefilled Read Only] |
| Total No. of Participants | [Prefilled Read Only] |

[ACTIVITIES SUMMARY]

|  |  |
| --- | --- |
| Id | *[Generated by the system]* |
| Activity Title | [Prefilled Read Only] |
| Activity Type | [Prefilled Read Only] |
| Total No. of Flows | [Prefilled Read Only] |
| Total No. of Participants | [Prefilled Read Only] |
| Grant | [Prefilled Read Only] |

### Budget

For further information on the funding rules please consult the Programme Guide.

#### Travel

|  |  |
| --- | --- |
| Id | [Prefilled Read Only] |
| Distance Band | [Prefilled Read Only] |
| Grant per Participant | [Prefilled Read Only] |
| No. of Participants *(including accompanying persons)* |  |
| Total Travel Grant | [Prefilled Read Only] |

#### Organisational Support

|  |  |
| --- | --- |
| Id | [Prefilled Read Only] |
| Duration per Participant (days) |  |
| No. of *Participants (including accompanying persons)* |  |
| Grant per Participant/Day | [Prefilled Read Only] |
| Total Organisational Support Grant | [Prefilled Read Only] |

#### Special Needs Support

|  |  |
| --- | --- |
| Id | [Prefilled Read Only] |
| No. of Participants With Special Needs |  |
| Description and Justification |  |
| Grant (EUR) |  |
| Total | [Prefilled Read Only] |

#### Exceptional Costs

|  |  |
| --- | --- |
| Id |  |
| No. of Participants |  |
| Description and Justification |  |
| Grant (EUR) |  |
| Total | [Prefilled Read Only] |

#### Total Activity Budget

|  |  |
| --- | --- |
| Budget Items | Grant |
| Travel Grant | [Prefilled Read Only ] |
| Organisational Support Grant | [Prefilled Read Only ] |
| Special Needs Support Grant | [Prefilled Read Only ] |
| Exceptional Costs Grant | [Prefilled Read Only ] |
| Total Activity Grant | [Prefilled Read Only] |

# Follow-up

Please describe what will happen after the end of your main activities.

## Impact

What is the expected impact on the participants, participating organisation(s) and target groups?

|  |
| --- |
| [Max 5000 characters] |

What is the desired impact of the project at the local, regional, national, European and/or international levels?

|  |
| --- |
| [Max 5000 characters] |

## Dissemination of Projects Results

Which activities will you carry out in order to share the results of your project outside your organisation and partners? What will be the target groups of your dissemination activities?

|  |
| --- |
| [Max 5000 characters] |

## Evaluation

Which activities will you carry out in order to assess whether, and to what extent, your project has reached its objectives and results?

|  |
| --- |
| [Max 5000 characters] |

# Budget Summary

|  |  |
| --- | --- |
| Budget items | Grant |
| Travel | [Prefilled Read Only] |
| Organisational Support | [Prefilled Read Only] |
| Special Needs Support | [Prefilled Read Only] |
| Exceptional Costs | [Prefilled Read Only] |
| Total Grant | [Prefilled Read Only] |

## Budget Summary per Activity type

|  |  |
| --- | --- |
| Activity Type | [Prefilled Read Only] |
| Travel | [Prefilled Read Only] |
| Organisational Support | [Prefilled Read Only] |
| Special Needs Support | [Prefilled Read Only] |
| Exceptional Costs | [Prefilled Read Only] |
| Grant | [Prefilled Read Only] |

## Budget Summary per Activity

|  |  |
| --- | --- |
| Activity ID | [Prefilled Read Only] |
| Activity Type | [Prefilled Read Only] |
| Travel | [Prefilled Read Only] |
| Organisational Support | [Prefilled Read Only] |
| Special Needs Support | [Prefilled Read Only] |
| Exceptional Costs | [Prefilled Read Only] |
| Grant | [Prefilled Read Only] |

# Project summary

Please provide a short summary of your project. Please recall that this section [or part of it] may be used by the European Commission, Executive Agency or National Agencies in their publications. It will also feed the Erasmus+ Project Results Platform.

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.

[The following question and answer are available if language used in application is not English]

Please provide a translation in English. This summary will be publicly available in case your project is awarded.

|  |
| --- |
| [Max 5000 characters] |

## Summary of Participating Organisations

|  |  |  |  |
| --- | --- | --- | --- |
| Organisation | Country of the Organisation | Role of Organisation | Type of Organisation |
| [Prefilled Read Only] | [Prefilled Read Only] | [Prefilled Read Only] | [Prefilled Read Only] |

## Summary of Activities and Participants

|  |  |  |  |
| --- | --- | --- | --- |
| Activity Type | No. of Activities | No. of Participants | Participants with Fewer Opportunities |
| [Prefilled Read Only] | [Prefilled Read Only] | [Prefilled Read Only] | [Prefilled Read Only] |
| Total | Sum | Sum | Sum |

# Annexes

The maximum number of all attachments is 10 and the maximum total size is 10240 KB.

[Maximum total size of attachments: 10240 KB]

Please download the Declaration of Honour, print it, have it signed by the legal representative and attach.

|  |  |
| --- | --- |
| File Name | [Allowed file types: PDF, DOC, DOCX, XLS, XLSX, JPG, TXT, ODT, ODS, CDOC, DDOC, BDOC.] |
| File Size (KB) |  |

Please attach a timetable of each of the activities planned in your project.

|  |  |
| --- | --- |
| File Name | [Allowed file types: PDF, DOC, DOCX, XLS, XLSX, JPG, TXT, ODT, ODS, CDOC, DDOC, BDOC.] |
| File Size (KB) |  |

Please attach any other relevant documents.

|  |  |
| --- | --- |
| File Name | [Allowed file types: PDF, DOC, DOCX, XLS, XLSX, JPG, TXT, ODT, ODS, CDOC, DDOC, BDOC.] |
| File Size (KB) |  |

## Declaration of Honour

To be signed by the person legally authorised to enter into legally binding commitments on behalf of the applicant organisation. Once signed it must be scanned and annexed to this application form.

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 Erasmus+ grant as set out in section BUDGET of this application form.

Declare that:

- All information contained in this application, is correct to the best of my knowledge.

- In the case of projects in the field of youth, the participants involved in the activities fall in the age limits defined by the Programme.

- 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 representatives

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

Certify that (in case the grant requested exceeds 60 000€):

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 National Agency 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 detrimental to the Communities' financial interests;

- it is not currently subject to an administrative penalty referred to in Article 109(1) of the Financial regulations (Council Regulation 966/2012).

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 National Agency 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 National Agency 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.

Commit:

- my organisation and the other partner organisations herein, to take part upon request in dissemination and exploitation activities conducted by National Agencies, the Executive Agency and/or the European Commission, 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:

National ID number of the signing person (if requested by the National Agency):

Stamp of the applicant organisation (if applicable):

# Checklist

Before submitting your application form to the National Agency, please make sure that

* It fulfils the eligibility criteria listed in the Programme Guide.
* All relevant fields in the application form have been completed.
* You have chosen the correct National Agency of the country in which your organisation is established.   
  Currently selected NA is: [code and name of NA].

Please also keep in mind the following:

Mandates of each partner to the applicant, signed by both parties, should be submitted as an annex to the application form. If the application is approved for funding, signed mandates will be considered as a condition for signature of the grant agreement.

[For applications with grant higher than 60000 EUR]

The grant exceeds 60 000 EUR. If the applicant organisation is not a public body or an international organisation, please do not forget to upload the necessary documents to give proof of your financial capacity in the Participant Portal (for more details, see the section "Selection Criteria" in Part C of the Programme Guide).

## Data Protection Notice

**PROTECTION OF PERSONAL DATA**

The application form will be processed electronically. All personal data (such as names, addresses, CVs, etc.) will be processed in pursuant to the Regulation on the protection of individuals with regard to the processing of personal data by the Union institutions, bodies, offices and agencies and on the free movement of such data, currently Regulation (EC) No 45/2001. Any personal data requested will only be used for the intended purpose, i.e. the processing of your application in accordance with the specifications of the call for proposals, the management of the administrative and financial aspects of the project if eligible and the dissemination of results through appropriate Erasmus+ IT tools. For the latter, as regards the details of the contact persons, an unambiguous consent will be requested.

For the exact description of the collected personal data, the purpose of the collection and the description of the processing, please refer to the Specific Privacy Statement associated with this form: <http://ec.europa.eu/programmes/erasmus-plus/documents/epluslink-eforms-privacy_en.htm>

I agree with the Data Protection Notice

|  |
| --- |
|  |