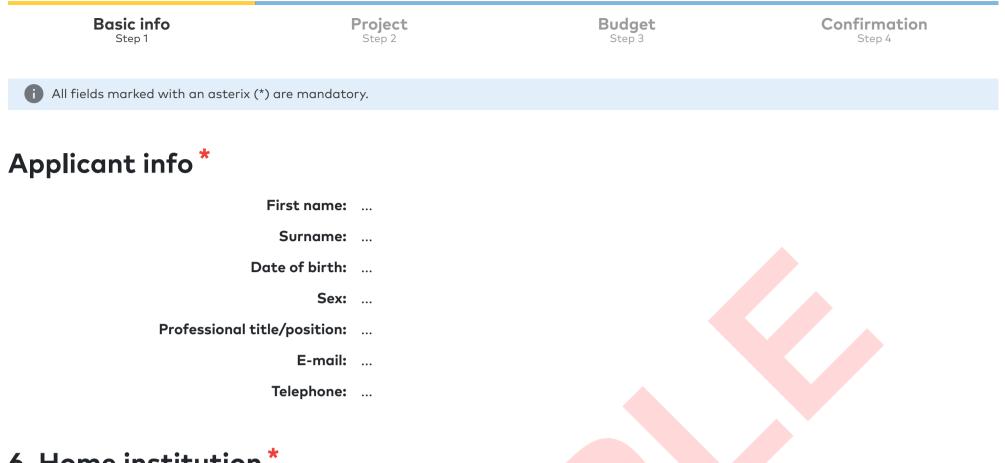
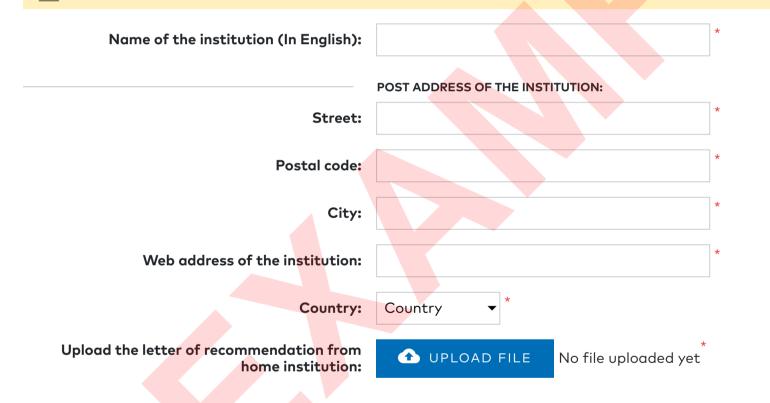
TEST APPLICATION ROUND for Public Administration 2020



6. Home institution *

A letter of <u>recommendation</u> from home institution must be enclosed to the application



7. Contact information of your superior at home institution *

Name:



8. Type of activity *

O Study trip

🔵 Internship

9. Host institutions abroad *

Name of the institution (In English):		*			
Contact person's first name:		*			
Contact person's surname:		*			
Contact person's position:		*			
E-mail:		*			
Telephone:	Ext 🔻	*			
Post address of the institution:		*			
Country:	Country 👻 *				
Web address of the institution:		*			
Upload the confirmation letter:	UPLOAD FILE No file uploaded yet	*			
REMOVE ADD INSTITUTION/PARTNER					
All fields marked with an asterix (*) are mandatory	ν.				
9. Project title: *					
9a. Sector of activity of the project *					
 Agriculture, forestry, fisheries and food issues Culture Economic, financial, business and entreprenet 	;				

O Education and research

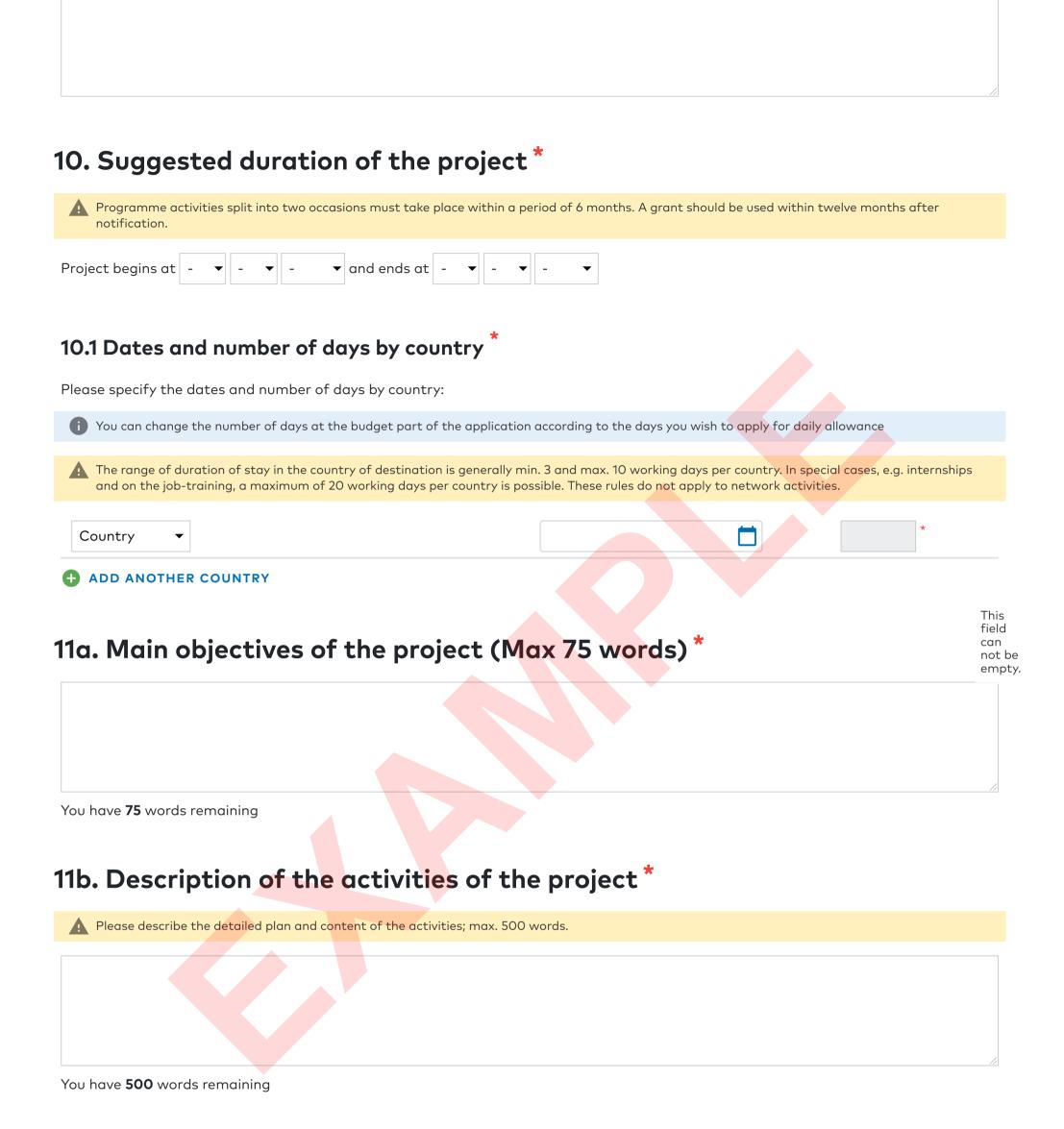
O Energy

O Environment

O Gender equality

- O Labour and working environment
- O Legislative issues, police
- O Local and regional development
- O Social and health
- O Other

Comments on the sector(s) of activity:



12. Expected results of the project (Max 100 words) *

You have 100 words remaining

13. How will the project benefit your organisation? (Max 150 words) *

You have 150 words remaining

14. How will the project contribute to the objectives of the programme?*

Please select the Indicators of Success that apply to your project objectives:

Increased visibility of Nordic-Baltic cooperation
 Increased quality and involvement in the Nordic-Baltic cooperation
 Increased knowledge transfer for mutual benefit on all administrative levels
 Increased network cooperation in politically prioritised areas
 Increased experience exchange on best practices in respect of public administration and facilitation of harmonisation of standards
 Increased coordination of joint Nordic-Baltic utilisation of different EU funds and project financing
 Increased cross-sectoral cooperation
 Joint projects developed and/or other spin-off effects as a result of the programme

Explain: (Max 150 words)

You have **150** words remaining

i All fields marked with an asterix (*) are mandatory.

15. Budget *

The budget should be in EUR. Confirmation letter regarding co-financing must be enclosed to the application. Activities carried out before the funding decision from the programme are not eligible for funding from the programme.

i Inputs marked with the background are calculated automatically by the system.

1. Travel costs (total)

BUDGET ITEM	PROJECT BUDGET	APPLIED FROM THE PROGRAMME
1.1 Travel insurance		
1.2 International Travel Costs		
1.3 Local Travel Costs		
Total		

2. Accomodation Costs and Per diem (combined) *

 The combined sum of expenditures on accommoday. 	nodation and per diem	ns may be covered	from the programme only up to 110 EUR per j	person per
COST TYPE	PER DAY	DAYS	PROJECT BUDGET APPLIED F PROGRAM	
2.1 Accomodation costs				
2.2 Per diem				
Total				

3. Co-financing and Amount Applied from the Programme

The programme can finance max. 60% of the total project costs .		
	PROJEC	T BUDGET APPLIED FROM THE PROGRAMME
3.1 Total Budget of the project:		
3.2 Co-financing (min. 40% of the total budg <mark>et):</mark> *		
3.3 Total Amount Applied from the Nordic-Baltic Mobility and Ne for Public Administration	twork Programme	
Upload a confirmation regarding co-financing:	UPLOAD FILE	o file uploaded yet

16. Additional financial support applied for/received from other sources *

- YES, applied
- O YES, received

O NO

If yes, please state the applied/received sum as well as source.

Is your application related to any other projects/applications submitted to this programme? If yes, please specify the name of the applying organisation and of the project leader of the project/application which is related to your project/application.

You have **300** words remaining

Applicant

PROJECT MANAGER	INSTITUTION
Name:	Organisation's name:
Telephone:	Street:
E-mail:	Postal code:
	City:
	Web address.:
	Country:
Date: 01.01.2020	ct manager.
SAVE	