



Context

Main objective of the project	Exchange of Good Practices
Project Start Date (dd-mm-yyyy)	2020-09-01
Project Total Duration	
Project End Date (dd-mm-yyyy)	
National Agency of the Applicant Organisation	
Language used to fill in the form	

For further details about the available Erasmus+ National Agencies, please consult the following page:
<https://ec.europa.eu/programmes/erasmus-plus/contact>

Sample



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.

In view of further publication on the Erasmus+ Project Results Platform, please also be aware that a comprehensive public summary of project results will be requested at report stage(s). Final payment provisions in the contract will be linked to the availability of such summary.

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

Sample



Applicant Organisation

Organisation ID	Legal Name	Country
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Partner Organisations

Organisation ID	Legal Name	Country
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Sample



Organisations

Application Organisation Details

Organisation ID
Legal name
Legal name (National language)
National ID (if applicable)
Department (if applicable)
Acronym
Address
Country
P.O. Box
Postal Code
CEDEX
City
Website
Email
Telephone
Fax

Sample

Profile

Type of Organisation
Is the organisation a public body?
Is the organisation a non-profit?

Legal Representative

Title
Gender



First Name
Family Name
Department
Position
Email
Telephone
Preferred Contact
OLS Contact
Same address as organisation
Address
Country
P.O. Box
Postal Code
CEDEX
City

No

Sample

Contact Person

Title
Gender
First Name
Family Name
Department
Position
Email
Telephone
Preferred Contact



OLS Contact	
Same address as organisation	No
Address	
Country	
P.O. Box	
Postal Code	
CEDEX	
City	

Organisation details

Organisation ID	
Legal name	
Legal name (National language)	
National ID (if applicable)	
Department (if applicable)	
Acronym	
Address	
Country	
P.O. Box	
Postal Code	
CEDEX	
City	
Website	
Email	
Telephone	
Fax	



Profile

Type of Organisation

Is the organisation a public body?

Is the organisation a non-profit?

Legal Representative

Title

Gender

First Name

Family Name

Department

Position

Email

Telephone

Preferred Contact

OLS Contact

Same address as organisation

No

Address

Country

P.O. Box

Postal Code

CEDEX

City

Contact Person

Title



Gender
First Name
Family Name
Department
Position
Email
Telephone
Preferred Contact
OLS Contact
Same address as organisation
Address
Country
P.O. Box
Postal Code
CEDEX
City

No

Sample



Budget Summary

This section summarises the budget you have requested and provides a breakdown per participating school. In case your project is approved, each of the participating schools will be offered a separate contract with their own budget.

Note on budget capping: According to the Programme Guide, the project budget for School Exchange Partnerships is limited to 16 500 EUR per school and per year of project duration (Special Needs Support and Exceptional Costs for Expensive Travel do not count for this cap). For your project, the current budget cap is 0 EUR. Please note that this cap applies to the partnership as a whole, while there is no limitation on how these funds can be divided between the schools participating in the project.

Project Budget Summary

Budget items	Grant
Total Grant	0.00 EUR

Learning, Teaching, Training Activities

Id	Activity Type	Travel Grant	Grant for Exceptional Costs for Expensive Travel	Individual Support Grant	Linguistic Support Grant	Grant
Total Grant		0.00 EUR	0.00 EUR	0.00 EUR	0.00 EUR	0.00 EUR

Budget per Organisation

Organisation	Country of Organisation	Grant
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Timetable

ID	Activity Type	Starting Period	Description
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Sample



Project Description

Priorities and Topics

Please select the most relevant horizontal or sectoral priority according to the objectives of your project.

If relevant, please select up to two additional priorities according to the objectives of your project.

Please select up to three topics addressed by your project

Description

Please describe the motivation for your project and explain why it should be funded.

What are the objectives you would like to achieve and concrete results you would like to produce?
How are these objectives linked to the priorities you have selected?

How are the planned activities going to lead to achievement of the project's objectives ?

eTwinning and Erasmus+ platforms

Have you used or do you plan to use eTwinning, School Education Gateway or the Erasmus+ Project Results Platform for preparation, implementation or follow-up of your project? If yes, please describe how.

If your project proposal is building on previous or ongoing eTwinning project(s), please explain how you plan to achieve this. Please clearly identify the relevant eTwinning project(s) by including the project title and project ID. In addition to the information provided here, do not forget to provide further information about the eTwinning aspect of your proposal in all other relevant parts of the application form.

Please keep in mind that experts will evaluate your application exclusively on the basis of the information provided in the application form. Therefore, when answering this question make sure to describe the eTwinning project(s) you plan to build on. Likewise, please be aware that independently of the experts' evaluation of the quality of your application, the National Agency may verify the provided information about your eTwinning project(s). In case the information is not correct, your application may be disqualified.

Participants

Please briefly describe who will take part in the project, including:

- Who are the different groups that will take part in the project activities (e.g. pupils, teachers, other school staff, parents, etc.)? Please also include information on local participants (those who will participate in project activities, but will not travel as part of the project).
- How are these groups going to participate?
- If pupils are involved in the project, please specify their age groups.

Note that specific details on selection of participants in Learning, teaching and training activities do



not need to be repeated here if they are described in the dedicated section of the form: [Learning](#)
[Teaching Training](#)

Participants with fewer opportunities: does your project involve participants facing situations that make their participation more difficult?

Sample



Management

Funds for Project Management and Implementation

Organisation role	Grant per organisation and per month	Number of organisations	Grant
Total		0	0.00 EUR

Project Management and Implementation

Please describe the tasks and responsibilities of each partner school. Explain how you will ensure sound management of the project and good cooperation and communication between partners during project implementation.

Please make sure to include all project management meetings, events and local activities of each school in the section: [Timetable](#)

How did you choose the project partners? Does your project involve schools that have never participated in a Strategic Partnership? If yes, please explain how more experienced schools can support less experienced partners during the project.

Sample



Erasmus+

Learning, Teaching, Training Activities

List of Activities

Do you plan to include transnational learning, teaching or training activities in your project?

Sample



Special Costs

In this section, you may request budget for types of expenses that are funded based on their actual cost. For more detailed information on what can be supported, please consult the Programme Guide or request advice from your National Agency.

Special Needs Support

Id	Organisation	Country of the Organisation	No. of Participants With Special Needs	Description and Justification	Requested Grant
Total					0.00 EUR

Exceptional Costs

Id	Organisation	Country of the Organisation	Description and Justification	Requested Grant (75%)
Total				0.00 EUR



Follow-up

How are you going to assess if the project's objectives have been met?

How will the participation in this project contribute to the development of the involved schools in the long-term? Do you have plans to continue using the results of the project or continue to implement some of the activities after the project's end?

Please describe your plans for dissemination and use of project results.

- How will you make the results of your project known within your partnership, in your local communities and in the wider public? Who are the main target groups you would like to share your results with?
- Are there other groups or organisations that will benefit from your project? Please explain how.

Sample



Annexes

The maximum number of all attachments is 100 and the maximum total size is 100 MB.

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

File Name

**File Size
(KB)**

Please download the Mandates, print them, have them signed by the legal representatives and attach.

File Name

**File Size
(KB)**

Please attach any other relevant documents.

If you have any additional questions, please contact your National Agency. You can find their contact details here.

File Name

**File Size
(KB)**

Total Size (KB)

0



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:

Please also keep in mind the following:

- Only the coordinating school needs to submit the application to its National Agency. Partner schools need to be listed in this application and must not submit the same application to their own National Agencies. If similar or identical applications are submitted by different schools to different National Agencies, all applications may be rejected.
- Only schools are eligible to participate in School Exchange Partnerships. Depending on the country where the school is registered, a specific definition of eligible schools applies. The definition or a list of eligible schools is published on the website of each National Agency. Before submitting your application, make sure that all participating schools are eligible in their respective countries.
- The documents proving the legal status of the applicant and each partner must be uploaded in the Participant Portal (for more details, see Part C of the Programme Guide - 'Information for applicants').

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 pursuant to Regulation (EC) No 45/2001 on the protection of individuals with regard to the processing of personal data by the EU institutions and bodies and on the free movement of such data. 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 projects' contact persons, an unambiguous consent will be requested.

For the full description of the collected personal data, the purpose of the collection and the description of the processing, please refer to the Specific Privacy Statement (see link below) associated with this form. http://ec.europa.eu/programmes/erasmus-plus/documents/eplu-link-eforms-privacy_en.htm

- I agree with the Specific Privacy Statement on Data Protection