

Partner Request/Registration form

If you are looking for a Partner for your Leonardo Da Vinci Project please complete the following details in ENGLISH and return to the Irish National Agency at leonardo@leargas.ie

ORGANISATION PROFILE		
1.	Name of organisation (In native language)	
2.	Name of organisation (in English)	
3.	Type of organisation	
4.	Country	
5.	Name of contact person	
6.	Address	
7.	Telephone	
8.	Fax	
9.	E-mail	
10.	Website	http://

PROJECT PROFILE					
11.	Type of project	Mobility IVT		Transfer of Innovation	
		Mobility PLM		Partnership	
		Mobility VETPRO			
12.	Sector				
13.	Own expected role in the project	Contractor	Co-ordinator	Partner	
		Yes	Yes	Yes	
14.	Short description of project idea				



EXPECTED PARTNER PROFILE		
15.	Type of organisation	
16.	Sector of organisation	
17.	Role of organisation	
18.	Preferred countries	
19.	Other details	

ADDITIONAL INFORMATION		
20.	Please provide any further details that you think are relevant.	

Note:

By returning this form I fully acknowledge and agree that the Leonardo Da Vinci National Agency may use and distribute the information contained herein, as required, in implementing their partner finding service.

Date: