**Force Majeure Notification Form**

Force Majeure is understood as unforeseeable circumstances that prevent someone from fulfilling a contract.

For further information on Force Majeure under : Key Action 1 + Key Action 2 Erasmus+ Programme and ESC51 + ESC30 European Solidarity Corps Programme, please refer to the relevant article in your Grant Agreement with Leargas (the National Agency).

‘Force majeure’ means any situation or event that:

* prevents either party from fulfilling their obligations under the Agreement,
* was unforeseeable, exceptional situation and beyond the parties’ control
* was not due to error or negligence on their part (or on the part of other participating entities involved in the action), and
* proves to be inevitable in spite of exercising all due diligence.

Any situation constituting force majeure must be:

* formally notified to the National Agency without delay, stating the nature, likely duration and foreseeable effects.
* force Majeure template should be used.
* the parties must immediately take all the necessary steps to limit any damage due to force majeure and do their best to resume implementation of the action as soon as possible.

Please note that Force Majeure is reviewed on a case by case basis and decision will be made at the Final Report stage.

If you feel a case of Force Majeure may apply, please complete the following Table:

|  |  |
| --- | --- |
| Project Reference No |  |
| Name of the Beneficiary |  |
| Nature of the force majeure |  |
| Name of the Participant, if applicable |  |
| Country of Destination, if applicable |  |
| Dates the participant is/was due to travel (start and end date), if applicable |  |
| Actual dates travelled, if applicable |  |
| Number of days completed, if applicable |  |
| Detailed description of circumstances leading to request of Force Majeure |  |

The following documents may be attached to support the force majeure request, depending on the nature of the force majeure:

1. Flight and accommodation receipts.
2. In the case of illness of the participant - a copy of a medical certificate / letter from doctor.
3. Confirmation from the insurer/service provider that accommodation/travel/other costs will not be reimbursed
4. Any other documentation supporting the force majeure claim, depending on its nature.

|  |  |
| --- | --- |
| Signature of the project contact person: |  |
| Date: |  |