Before filling in this form, please read carefully the relevant call for proposals and any other reference documents related to this grant programme available on our site: <https://frontex.europa.eu/about-frontex/grants/>

Frontex may ask an applicant to provide additional information or to clarify the supporting documents submitted in connection with the application, if such information or clarification does not substantially change the proposal.

**ACTION 2: MOBILITY AND EXCHANGE**

**GRANT APPLICATION FORM**

|  |  |
| --- | --- |
| **TITLE OF THE CALL FOR PROPOSALS** | **DEVELOPMENT AND DELIVERY OF TRAINING ACTIVITIES FOR BORDER AND COAST GUARDS** |
| **REFERENCE NUMBER OF THE CALL FOR PROPOSALS** | 2019/CFP/TRU/01 |
| **DEADLINE** | **28 JUNE 2019** |

|  |  |
| --- | --- |
| **SUMMARY OF THE APPLICATION** | |
| **PROJECT TITLE:** |  |
| Please indicate the **thematic area** selected from Frontex common core curricula: |  |
| Name of the applying institution (coordinator): |  |
| Planned duration of the project (start – end date): |  |
| Grant requested from Frontex (in EUR)[[1]](#footnote-2): |  |
| **SUMMARY OF THE PROJECT (minimum 100 and maximum 200 words).**  **For successful applications, this section will be published, as presented below, in compendia and other publications used for the promotion and publicity of the Frontex Training Unit grants. You should therefore ensure that it gives a concrete overview of the project in its content, structure and main characteristics (thematic areas/s covered, institutions involved, structure and length, etc.).** | |
| *Your text here:* | |

By submitting a proposal the applicants accept that in case of an award, certain data such as name, address and grant amount will be published.

|  |  |
| --- | --- |
| Date: |  |
| **Name and signature:**  (of a person authorised to enter into legally binding commitments on behalf of the applicant) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **LIST OF CONSORTIUM MEMBERS** | | | |
| **Number** | **Name of the institution** | **City** | **Country** |
| 1 |  |  |  |
| 2 |  |  |  |
|  |  |  |  |

Please add rows if needed.

# I. INFORMATION ON THE APPLICANTS

The term “applicant” refers to the legal entity applying for funding. Under this call, the term covers a consortium of entities (applying jointly). A consortium must appoint one member (the Coordinator) who is in charge of sending the proposal on behalf of the consortium.

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| **1 REFERENCES OF THE APPLICANTS** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1.1 APPLICANT NO.1 (THE COORDINATOR)** | | | | | | | | |
| **1.1.1 IDENTITY OF THE APPLICANT** | | | | | | | | |
| Official full name:  (please provide an English version if one exists) | | |  | | | | | |
| Acronym (if applicable): | | |  | | | | | |
| Official legal form: | | |  | | | | | |
| Legal personality[[2]](#footnote-3): | | | YES  NO | | | | | |
| Place of establishment or registration:  (Address and country) | | |  | | | | | |
| VAT number  (if applicable): | | |  | | | | | |
| **1.1.2 CONTACT DETAILS[[3]](#footnote-4)** | | | | | | | | |
| **OFFICIAL ADDRESS** | | | | | | | | |
| Street address: |  | | | | | | | |
| Postcode: |  | | | | | | | |
| City/Town: |  | | | | | | | |
| Country: |  | | | | | | | |
| Telephone: |  | | | | | | | |
| E-mail address: |  | | | | | | | |
| Website: |  | | | | | | | |
| **ADDRESS FOR CORRESPONDENCE (if different than official address)** | | | | | | | | |
| Street address: |  | | | | | | | |
| Postcode: |  | | | | | | | |
| City/Town: |  | | | | | | | |
| Country: |  | | | | | | | |
| **1.1.3 CONTACT PERSON (PERSON RESPONSIBLE FOR THE MANAGEMENT OF THE PROPOSAL)[[4]](#footnote-5)** | | | | | | | | |
| First name: | |  | | | | | | |
| Family name: | |  | | | | | | |
| Position/Function: | |  | | | | | | |
| Telephone: | | + | | | Mobile: | | + | |
| E-mail address: | |  | | | | | | |
| **1.1.4 LEGAL REPRESENTATIVE (PERSON AUTHORISED TO SIGN THE AGREEMENT)** | | | | | | | | |
| First name: | |  | | | | | | |
| Family name: | |  | | | | | | |
| Position/Function/  Mandate: | |  | | | | | | |
| Telephone: | | + | | | | Mobile: | | + |
| E-mail address: | |  | | | | | | |
| **1.1.5 PROFILE OF THE APPLICANT — GENERAL AIMS AND ACTIVITIES** | | | | | | | | |
| Please indicate the legal status by **ticking all relevant options** (one or several if applicable)  Public body  Research Centre/Institute  Educational and training establishment  Other (please specify)  Higher education institution  Vocational education institution | | | | | | | | |
| **1.1.6 Description of the applicant’s activities and general aims related to education and training of border and coast guards. Please include information with respect to the eligibility criteria indicated in the call (minimum 100 and maximum 200 words)** | | | | | | | | |
| *Your text here:* | | | | | | | | |
| **1.1.7 BANK DETAILS OF APPLICANT NO.1 (THE COORDINATOR)** | | | | | | | | |
| 1.1.7.1 For applicants who have **never submitted** the relevant Financial Identification Form to Frontex or another EU institution | | | | | | | | |
| The bank details are indicated in the attached Financial Identification Form. | | | | | | | | |
| 1.1.7.2 For applicants who have **submitted the relevant** Financial Identification **Form** to Frontex or another EU institution **in the past** and their account is registered – please indicate the details of the bank account: | | | | | | | | |
| Name of the Bank Account Holder: | | | |  | | | | |
| Name of the Bank: | | | |  | | | | |
| Address of the Bank: | | | |  | | | | |
| IBAN: | | | |  | | | | |
| Payment reference: | | | |  | | | | |

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| --- | --- | --- | --- | --- | --- |
| **1.2 APPLICANT NO.2 (Repeat this part as often as is required to include all applicants).** | | | | | |
| **1.2.1 IDENTITY OF THE APPLICANT** | | | | | |
| Official full name:  (please provide an English version if one exists) | | |  | | |
| Acronym (if applicable): | | |  | | |
| Official legal form: | | |  | | |
| Legal personality[[5]](#footnote-6): | | | YES  NO | | |
| Place of establishment or registration:  (Address and country) | | |  | | |
| VAT number  (if applicable): | | |  | | |
| **1.2.2 CONTACT DETAILS (OFFICIAL ADDRESS)[[6]](#footnote-7)** | | | | | |
| Street address: |  | | | | |
| Postcode: |  | | | | |
| City/Town: |  | | | | |
| Country: |  | | | | |
| Telephone: |  | | | | |
| E-mail address: |  | | | | |
| Website: |  | | | | |
| **1.2.3 LEGAL REPRESENTATIVE** | | | | | |
| First name: | |  | | | |
| Family name: | |  | | | |
| Position/Function: | |  | | | |
| Telephone: | | + | | Mobile: | + |
| E-mail address: | |  | | | |
| **1.2.4 PROFILE OF THE APPLICANT — GENERAL AIMS AND ACTIVITIES** | | | | | |
| Please indicate the legal status by **ticking all relevant options** (one or several if applicable)  Public body  Research Centre/Institute  Educational and training establishment  Other (please specify)  Higher education institution  Vocational education institution | | | | | |
| **1.2.5 Description of the applicant’s activities and general aims related to education and training of border and coast guards. Please include information with respect to the eligibility criteria indicated in the call. (minimum 100 and maximum 200 words)** | | | | | |
| *Your text here:* | | | | | |

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| **2. OPERATIONAL AND FINANCIAL CAPACITY** |

|  |
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| **2.1 OPERATIONAL CAPACITY TO COMPLETE THE PROPOSED ACTION** |
| The applicant/s confirms its operational capacity, as required in the call for proposals, by signing the Declaration on honour (annex to the application form).  CVs of key staff who will be involved in the project are attached to the application as a proof of its capacity to implement the action effectively. |
| **2.2 FINANCIAL CAPACITY** |
| The applicant/s confirms its operational capacity, as required in the call for proposals, by signing the Declaration on honour (annex to the application form). |

# II. INFORMATION ON THE ACTION FOR WHICH THE GRANT IS REQUESTED

|  |
| --- |
| **1 DESCRIPTION OF THE PROPOSED PROJECT** |

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| --- |
| **1.1 RELEVANCE OF THE PROJECT** |
| Please describe how the proposed project will contribute to achieving the objectives of the call/action and facilitate the exchange of knowledge and good practices in education and training of border and/or coast guards. *(minimum 150 words)*. |
| *Your text here:* |
| Please describe how the project addresses the objectives of the call and the selected thematic area/s *(minimum 150 words).* |
| *Your text here:* |
| Please describe how the planned mobility/exchange is in line with the established curricula of the training institutions and harmonised with the selected thematic area/s of Frontex common core curricula *(minimum 150 words).* |
| *Your text here:* |
| Please describe learning outcomes and job competences for the given target group in line with the Sectoral Qualifications Framework for Border Guarding *(minimum 150 words)*. |
| *Your text here:* |
| **1.2 PROJECT DESIGN AND IMPLEMENTATION** |
| Please describe the project plan and activities as well as how the planned activities lead to the achievement of the objectives and results and how they are related to the common core curricula. Please describe the proposed methodology; include the aspects of quality, feasibility and adequacy for achieving the proposed results. Please also refer to the relevant and applicable phases related to the management and organisation of the mobility/exchange (i.e. preparation, selection of target groups, implementation, evaluation, impact and dissemination) in the timetable below to present the schedule of activities *(minimum 200 words)*. |
| *Your text here:* |
| |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Month of implementation  (1-12)  Activity | Oct 2019 | Nov 2019 | Dec 2019 | Jan 2020 | Feb  2020 | Mar  2020 | Apr 2020 | May 2020 | Jun 2020 | Jul 2020 | Aug 2020 | Sep 2020 | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| Please describe the budget and allocation of resources for planned activities. Please include information on tasks, roles and financial resources allocated, subcontracting and sources of funding *(minimum 200 words).* |
| *Your text here:* |
| Please describe the opportunities that the project creates for all the beneficiary countries to enhance cooperation among the training institutions of Member States and/or non-EU countries *(minimum 150 words).* |
| *Your text here:* |
| Please describe the measures for selecting participants in the mobility/exchange activities and for addressing their learning needs *(minimum 150 words).* |
| *Your text here:* |
| Please describe the quality assurance plan; include the identified risks and their mitigation plan *(minimum 150 words).* |
| *Your text here:* |
| **1.3 PROJECT TEAM** |
| Please describe the capacity and the role of each applicant as well as their planned contribution to deliver quality results and to ensure the achievement of the call/action objectives in line with the selected thematic area/s *(minimum 150 words).* |
| *Your text here:* |
| Please describe the fields of expertise and competences of the consortium members (including allocated time and input) and how they are complementary to and of added value for the implementation of the project *(minimum 200 words).* |
| *Your text here:* |
| Please describe the consortium cooperation arrangements (working mechanisms, decision-making process, communication, management tools, etc.), how tasks are distributed among the consortium members and how knowledge on the topic and education/training within the project team is ensured *(minimum 150 words).* |
| *Your text here:* |
| Please list the key staff and explain their role in the implementation of mobility/exchange, taking into account their knowledge, skills and competence in the selected thematic area/s *(minimum 150 words).* |
| *Your text here:* |
| Please describe the opportunities offered to the participants to broaden their professional network and familiarise themselves with the working practices of other training and educational institutions *(minimum 150 words).* |
| *Your text here:* |
| **1.4 IMPACT AND SUSTAINABILITY** |
| Please describe the expected impact on education and training for border and/or coast guards as well as on their interoperability *(minimum 150 words).* |
| *Your text here:* |
| Please describe how the project outcomes will support the sustainable development of education and training for border and coast guards at regional and/or European level *(minimum 150 words).* |
| *Your text here:* |
| Please describe the dissemination plan and how the experiences and results gained during the project will reach the relevant target group and stakeholders *(minimum 150 words).* |
| *Your text here:* |

|  |  |
| --- | --- |
| **2 PLANNED DURATION OF THE PROJECT (in months):** | |
| **Planned starting date:** | *DD.MM.YYYY* |
| **Planned end date:** | *DD.MM.YYYY* |
| **Estimated duration in months:** |  |

|  |
| --- |
| **3 3 BUDGET** |
| Estimated budget and sources of funding. Please fill in the relevant annexes.  Applications must include a detailed estimated budget, in balance, in which all costs and contributions are given in euros. Applicants from Member States outside the euro zone may use the monthly rate published on the Commission's website at <http://ec.europa.eu/budget/contracts_grants/info_contracts/inforeuro/index_en.cfm> for the month in which they are submitting the application. |

# III. ADDITIONAL FUNDING

|  |
| --- |
| **1 UNION FUNDING** |
| **1.1 APPLICATIONS AND/OR ONGOING FUNDING BY THE UNION** |
| Has the applicant (including any member of the consortium) received or applied for any Union funding for the same action or part of the action or for its functioning during the same financial year?  NO  YES – Continue to the following table |

|  |  |  |
| --- | --- | --- |
| **APPLICATION, GRANT OR ANY OTHER EU FUNDING** – To be specified for each of the applications or obtained grants in the current or previous years (add columns if necessary) | | |
|  | Programme 1 | Programme 2 |
| Name of the applicant |  |  |
| Title of the action (or part of the action) |  |  |
| Union Programme concerned |  |  |
| Union Institution or Body/Agency to which the application was submitted or which took the award decision |  |  |
| Year of award or application and duration of the operation |  |  |
| Value of the application, grant or other funding |  |  |

|  |
| --- |
| **LEGAL NOTICE**  The applicant must inform Frontex if any of the above-mentioned applications for funding made to other European Commission departments or Union Institutions or Bodies/Agencies is approved after the submission of this grant application. |

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| --- |
| If processing your reply to the call for proposals involves the recording and processing of personal data (such as name, address and CV), such data will be processed pursuant to Regulation (EU) 2018/1725 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, and repealing Regulation (EC) No 45/2001 and Decision No 1247/2002/EC.  Unless indicated otherwise, any personal data requested are required to evaluate your application in accordance with the call for proposals and will be processed solely for that purpose by Head of Training Unit. Details concerning the processing of personal data are available on the privacy statement annexed to the call for proposals. |

Annexes:

* Estimated budget
* Declaration on honour by the applicant
* Financial Identification Form
* Legal Entity Form
* CVs of the experts, key staff
* Mandate letters
* Activity programme for mobility and exchange

Annex

|  |
| --- |
| **ACTIVITY PROGRAMME FOR MOBLITY AND EXCHANGE** |

|  |
| --- |
| **Please describe in detail the activity programme[[7]](#footnote-8) for mobility and exchange, including minimum requirements as specified in section 6 of the call.** |
| *You may use the text field here or attach a separate document.* |

# CHECK-LIST FOR APPLICANTS

Before submitting the application, applicants are requested to verify that their application meets the criteria specified below.

|  |  |
| --- | --- |
| The application is sent no later than the deadline for submitting applications specified in section 3 of the call for proposals. |  |
| The application is submitted in English, on the correct form and dated. |  |
| All sections of the application form have been completed in accordance with the requirements set in the call for proposals. |  |
| The application is signed by the person authorised to enter into legally binding commitments on behalf of the applicant. |  |
| The application is submitted in 2 copies (one original and one copy not stapled). |  |
| The applicant fulfils the eligibility criteria set out in sections 6.1, 6.3 and 6.4 of the call. |  |
| The application addresses at least one thematic area. |  |
| The maximum duration of the project is 12 months. |  |
| The planned end date of the project is 30 September 2020 or before. |  |
| The total grant requested from Frontex does not exceed EUR 60,000. |  |
| The requested Frontex contribution does not exceed 95% of the eligible costs of the project. |  |
| The budget annex has been duly filled in (including Sources of funding) in accordance with the requirements set out in the call and is attached. |  |
| The declaration on honour has been signed and attached. |  |
| The Financial Identification Form is filled in and attached to the application (concerns only those applicants who have not submitted the form to Frontex before or who wish to provide new bank account details for the purpose of the project). |  |
| The Legal Entity Form is filled in and attached to the application (concerns only those applicants who have not submitted the form to Frontex before). |  |
| The key staff CVs are attached as set out in point 9.2 of the call. |  |
| The mandate letters for each applicant have been signed and attached. |  |
| The Activity programme for mobility/exchange is signed and attached. |  |
| The application meets the submission arrangements set out in the call (section 14 of the call). |  |

1. The amount should be the same as in the Annex I.3 – Estimated budget. [↑](#footnote-ref-2)
2. Legal personality is understood as an applicant’s capacity to sign contracts and constitute a party in court proceedings under the applicable national legislation. The legal details are presented in the attached Legal Entity Form. [↑](#footnote-ref-3)
3. Frontex must be notified of any change to the contact details in writing. Frontex will not be held responsible if it cannot contact an applicant. [↑](#footnote-ref-4)
4. Frontex must be notified in writing of change of the contact person. Frontex will not be held responsible if it cannot contact an applicant. [↑](#footnote-ref-5)
5. Legal personality is understood as an applicant’s capacity to sign contracts and constitute a party in court proceedings under the applicable national legislation. [↑](#footnote-ref-6)
6. Frontex must be notified of any change to the contact details in writing. Frontex will not be held responsible if it cannot contact an applicant. [↑](#footnote-ref-7)
7. The activity programme should be jointly drafted by consortium members. [↑](#footnote-ref-8)