**APPLICATION FORM FOR PRE-DEFINED PROJECT PROMOTER**

**of the EEA Financial Mechanism 2014-2021**

**FUND FOR BILATERAL RELATIONS**

**GENERAL INFORMATION**

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| **Promoter of the initiative**  *(Name, legal address)* |  |
| **Legal status** |  |
| **Project title** |  |
| **Title of the initiative\*** |  |
| **Contact person:**  *Provide name and contact details (e-mail, phone).* |  |

*\** *Provide title of the initiative both in Latvian and English for further communication purposes*

**Background and justification of the initiative**

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| **1. Justification for the necessity of the initiative**  *1.1.* *Mark which specific area of the programme will benefit from the implementation of this initiative:*  LV-LOCALDEV  Local Development and Poverty Reduction;  Good Governance, Accountable Institutions, Transparency, Including Integration of Asylum Seekers.  *1.2. Describe how the initiative will contribute to the achievement of the programme's objective and justify the relevance of the challenges to be addressed in relation to the respective project. Specify the purpose of the initiative. Please provide information on planned Donor State Partner and its experience in the programme area and contribution to the implementation of the initiative. Describe the previous cooperation experience (if applicable) with the planned Donor State Partner and whether further cooperation is planned?*   |  | | --- | |  | |
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**2. Aim of the initiative**

*Initiative is planned to be implemented under the Fund for Bilateral Relations aimed to strengthen the cooperation and increase mutual knowledge and understanding between the Donor States (Norway, Iceland and Liechtenstein) and Latvia, therefore the aim of the initiative shall contribute to the achievement of the aim of the Fund for Bilateral Relations. Outline the*

*benefits and added value of the initiative in promoting bilateral cooperation between Latvian and Donor State institutions.*

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**3. Description of the initiative and planned activities**

*Describe planned activities and the responsibility of the participants involved, including planned location (country, city).*

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| **4. Planned results**  *Briefly describe what the expected deliverables of the initiative are. Outline here how the initiative will contribute to the common bilateral outcome “Enhanced collaboration between Beneficiary States and Donor States entities involved in the programme”.*   |  | | --- | |  |   **5. Time frame of the initiative** |

*5.1. Indicate the quarter of the year (2019-2024) in which the initiative is planned.*

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| **Initiative** | **Year** | | | |
| **I** | **II** | **III** | **IV** |
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| *5.2. Estimated duration (number of days):* |  |

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| *5.3. If a specific time is known (date, month), please indicate this.* |  |

**6. Planned expenditures**

*Specify the planned eligible costs. If costs are not planned, please tick with the symbol “-”.*

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| **No.** | **Eligible costs** | **Number of units** | **Unit cost (EUR)** | **Total**  **(EUR)** |
| 1. | Costs of events for attracting donor state partners |  |  |  |
| 1.1. | * *specify cost subheadings (e.g. daily allowance, travel expenses, etc.)* |  |  |  |
| 2. | Costs of organising conferences, seminars, courses, campaigns, travels, workshops and meetings in Latvia and Donor States. |  |  |  |
| 2.1. | *indicate cost subheadings* |  |  |  |
| 3. | Costs of research, collecting, reporting, and publishing data |  |  |  |
| 3.1. | *specify cost subheadings (e.g. rental of premises, catering, etc.)* |  |  |  |
| 4. | Costs of external consultants and experts involved |  |  |  |
| 4.1. | *indicate cost subheadings* |  |  |  |
| 5. | Other costs that are necessary for organizing initiative to be approved in Cooperation Committee |  |  |  |
| 5.1. | *indicate cost subheadings* |  |  |  |
|  | **Total\*:** |  |  |  |

**7. Contracts for the implementation of the fund for bilateral relations initiative**

*Please indicate all planned and existing contracts for the implementation of the bilateral relation initiative.*

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| **No.** | **Subject matter of contract** | **Actual or estimated contract value** | **Procurement procedure**  **(if applicable, procurement number)** | **Contract details**  **(if applicable) - date, number, service provider** |
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| **8. Target group(s) of initiative** |

*Name the institutions that will participate in the initiative, indicating in an appropriate field*

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| **Project Promoter\*** |  |
| **Project Partners** |  |
| **Representatives of Donor State institutions\*\*** |  |
| **Donor State experts\*\***  (if a specific member is known) |  |
| **Representatives of project target group institutions** |  |
| **International organisation** |  |
| **Justification of Donor state/ international organisation involvement** |  |

*\* The participation of the Project Promoter in the bilateral relation fund initiative is mandatory.*

*\*\* The participation of representatives of at least one Donor State in the initiative is mandatory.*

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| **Responsible official or person responsible for implementing the initiative (name, surname, signature)\*:** |  |
| **Date\*:** |  |

*\* The detail “signature” of the document shall not be filled in if the electronic document has been prepared in conformity with the regulatory enactments regarding the drawing up of electronic documents.*