General Information

This application form consists of the following main sections:

- **Context:** this section asks for general information about the type of project proposal you want to submit and about the Agency that will receive, assess and select your proposal;
- **Applicant organisation:** this section asks for information about the applicant organisation;
- **Main activities :** this section asks for information about the type and number of mobilities foreseen;
- **Budget:** in this section you will be asked to give information about the amount of the EU grant you request;
- **Quality questions:** in this section, for each Partner Country, the applicant is asked to demonstrate the relevance of the planned mobilities, the quality of cooperation agreements, the quality of the project design and its impact and dissemination.
- **Check List/Data Protection Notice/Declaration of Honour:** in these sections, the applicant is made aware of important conditions linked to the submission of the grant request;
- **Annexes:** in this section, the applicant needs to attach additional documents that are mandatory for the completion of the application.
- **Submission:** in this section, the applicant will be able to confirm the information provided and to submit the form online.

For more information on how to fill in this application form, you can read the Technical Guidelines for e-Forms.

For more information on the award criteria according to which the quality assessment of this application will be done, please refer to the Programme Guide and the Guide for Experts.

Context

Programme	Erasmus+
Key Action	Learning Mobility of Individuals
Action	Mobility of Learners and Staff
Action Type	**Higher education student and staff mobility**

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	between Programme and Partner Countries
Call	2015
Deadline for Submission (dd-mm-yyyy hh:nn:ss - Brussels, Belgium Time)	
Language used to fill in the form	

The date will be automatically displayed: **4 March at 12:00 (midday Brussels time)**

Project Identification

All projects will start on 1st June of 2015

Choose "16 months" or "24 months" months

End date will be automatically prefilled depending on duration

Project Start Date (dd-mm-yyyy)	
Project Total Duration (Months)	
Project End Date (dd-mm-yyyy)	
Applicant Organisation Full Legal Name (Latin characters)	
Form Hash Code	0000000000000000

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National Agency of the Applicant Organisation

Identification	

For further details about the available Erasmus+ National Agencies, please consult the following page:

http://ec.europa.eu/education/erasmus-plus/national-agencies_en.htm

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All shaded fields in this section will be automatically prefilled thanks to your PIC code

Applicant Organisation

Role [NOT VISIBLE]	APP - Applicant Organisation
PIC	Check PIC
Full legal name (National language)	
Full legal name (Latin characters)	
Acronym	
National ID (if applicable)	
Department (if applicable)	
Address	
Country	
Region	
P.O. Box	
Post Code	
CEDEX	
City	
Website	
Email	
Telephone 1	
Telephone 2	
Fax	

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Profile

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

Consortium

Are you applying on behalf of a consortium?
YES
NO

Accreditation

Have you received any type of accreditation before submitting this application?

Accreditation Type	Accreditation Reference

[+][-]

If you clicked "yes" above, you will have to introduce the reference of your **ERAPLUS-ERA-CONSORTIA Higher Education Mobility Consortium Certificate**. If you do not have this certificate yet, you will be able to indicate "I have applied for it".

If you clicked "no", this field will be automatically prefilled with your **Erasmus Code** (for example: Madrid 01).

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Legal Representative

Role	LR – Legal Representative
Title	
Gender	
First Name	
Family Name	
Department	
Position	
Email	
Telephone 1	

If the address is different from the one of the organisation, please tick this box ☐

Address	
Country	
Region	
P.O. Box	
Post Code	
CEDEX	
City	
Telephone 2	

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Contact Person

Role [NOT VISIBLE]	CP – Contact Person
Title	
Gender	
First Name	
Family Name	
Department	
Position	
Email	
Telephone 1	

If the address is different from the one of the organisation, please tick this box ☐

Address	
Country	
Region	
P.O. Box	
Post Code	
CEDEX	
City	
Telephone 2	

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Main Activities

Please enter the different outgoing and incoming mobility activities for each of the Partner Countries with which you intend to cooperate. Be aware that each mobility project per Partner Country will be assessed separately.

Due to limited budget availability, National Agencies may limit: i) mobility flows in (a) particular degree level(s) (for example limiting applications to one or two cycles only – first, second or third cycle): ii) mobility for staff only or students only, iii) the duration of mobility periods. Please consult your National Agency's website to know if it applies these limitations: http://ec.europa.eu/education/tools/national_agencies_en.htm

If you know the city of origin and the city of the venue for all mobility activities in a flow and they are the same for all mobility activities in that flow, you will introduce the travel distance between those cities; if there are several cities of origin and/or venue in a flow, you will introduce the average of the different travel distances. If the city of origin or the city of the venue is not known yet, you will introduce the travel distance from/to the capital of that country. Please use the distance calculator available here: http://ec.europa.eu/programmes/erasmus-plus/tools/distance_en.htm

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You should try to be as precise as possible in order to receive a grant that will cover your needs as accurately as possible.

Activities' Details

You will be able to choose an activity type between:
"Student Mobility for Studies To/From Partner Countries"
"Staff Mobility for Teaching To/From Partner Countries"
"Staff Mobility for Training To/From Partner Countries"

Activity No.	A1
Activity Type	

Flow No.	Incoming/Outgoing	Education Level	Country of Origin	Country of Destination	Distance Band	Requested Duration					No. of Participants
						Total Duration (full months) [Visible if Students]	Total Duration (extra days) [Visible if Students]	Total Duration Excluding Travel (days) [Visible if Staff]	Travel Days [MAX 2 DAYS] [Visible if Staff]	Total Duration Including Travel (days) [Visible if Staff]	
1											
					Total						[+]-]

You will be able to choose between:
EQF-5 Short cycle within the first cycle / Short-cycle tertiary education (ISCED-5)
EQF-6 First cycle / Bachelor's or equivalent level (ISCED-6)
EQF-7 Second cycle / Master's or equivalent level (ISCED-7)
EQF-8 Third cycle / Doctoral or equivalent level (ISCED-8)

After using the "distance-calculator", choose between:
0-99 km
100-499 km
500-1999 km
2000-2999 km
3000-3999 km
4000-7999 km
8000 km or more

If you click here you will be able to insert a new flow

Add Activity

Remove Activit

If you click here you will be able to insert a new table and choose a different activity type

Validate

For example, if you choose to introduce an "incoming" flow, the country of destination will be automatically prefilled with your country and you will be able to choose the country of origin from a drop-down menu

All data in this table will be automatically prefilled with the data introduced in the "Activities' Details" table

Summary of Activities and Participants per partner country

Partner Countries	Activity Type	Incoming				Outgoing			
		Total Duration (full months)	Total Duration (extra days)	Total Duration Excluding Travel (days)	No. of Participants	Total Duration (full months)	Total Duration (extra days)	Total Duration Excluding Travel (days)	No. of Participants
Partner Country [X]	Student Mobility for Studies To/From Partner Countries			N/A				N/A	
	Staff Mobility for Teaching To/From Partner Countries	N/A	N/A			N/A	N/A		
	Staff Mobility for Training To/From Partner Countries	N/A	N/A			N/A	N/A		

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Validate

Budget

For further information please consult the Programme Guide for the overview of funding rules. Please note that all amounts must be expressed in Euros.

Travel

Activity No.	Activity Type	Flow No.	Country of Origin	Country of Destination	Distance Band	Total No. of Participants	Travel Grant per Participant	Total Travel Grant Requested
							Total	

All data in this table will be automatically prefilled with the data introduced in the "Activities' Details" table

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All data in this table will be automatically prefilled with the data introduced in the "Activities' Details" table

Individual Support

Activity No.	Activity Type	Flow No.	Country of Origin	Country of Destination	Requested Duration			Total No. of Participants	Grant per Participant	Total Grant Requested
					Total Duration (full months) **[Prefilled if Students]**	Total Duration (extra days) **[Prefilled if Students]**	Total Duration Including Travel (days) **[Prefilled if Staff]**			
									Total	

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Validate

Organisational Support

Data in this table will be automatically prefilled with the data introduced in the "Activities' Details" table

No. of Participants	Total Grant Requested

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Budget Summary

The sum of previous sections representing the total grant requested for this application.

Activity No.	Activity Type	Travel	Individual Support	Total
Total				

Data in these tables will be automatically prefilled with the data introduced in the previous "budget" tables

Organisational Support	

Project Total Grant

Grant Calculated	

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Quality Questions

Partner Country [X]

Relevance of the strategy

Explain why the planned mobility project is relevant to the internationalisation strategy of the higher education institutions involved (both in the Programme and Partner Country). Justify the proposed type(s) of mobility (students and/or staff). Provide a list of the higher education institutions from the Partner Country.

Quality of the cooperation arrangements

Detail your previous experience of similar projects with higher institutions in this Partner Country, if any, and explain how, for the planned mobility project, responsibilities, roles and tasks will be defined in the Inter-institutional Agreement.

Quality of project design and implementation

Present the different phases of the mobility project and summarise what partner organisations plan in terms of selection of participants, the support provided to them and the recognition of their mobility period (in particular in the Partner Country).

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Impact and dissemination

Explain the desired impact of the mobility project on participants, beneficiaries, partner organisations and at local, regional and national levels. Describe the measures which will be taken to disseminate the results of the mobility project at faculty and institution levels, and beyond where applicable, in both the Programme and Partner Countries.

When you answer each of the four quality questions, you will address all types of mobility that you have applied for with a given Partner Country. The maximum number of characters per field is 5000.

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Checklist

Before submitting online your application form to the National Agency, please make sure that it fulfils the eligibility criteria listed in the Programme Guide and check that:

- ☐ you have used the official Key Action 1 application form for all your planned mobility activities between Programme and Partner Countries
- ☐ all relevant fields in the application form have been completed.
- ☐ the application form is submitted to the correct National Agency of the country in which your organisation is established.
- ☐ the application form has been completed using one of the official languages of the Erasmus+ Programme Countries.
- ☐ you have annexed all the relevant documents:
  - ☐ the Declaration of Honour signed by the legal representative mentioned in the application.
  - ☐ Only for applications submitted by consortia, the mandate of each member of the consortium to the applicant signed by both parties.
- ☐ In case your PIC is not yet validated, you have uploaded the documents to give proof of the legal status of your institution in the participants' portal (for more details, see the section "Selection Criteria" in Part C of the Programme Guide).
- ☐ In case you have not already done it in previous calls, for grants exceeding 60 000 EUR, you have uploaded the documents to give proof of your financial capacity in the participants' portal (for more details, see the section "Selection Criteria" in Part C of the Programme Guide). Not applicable in the case of public bodies or international organisations.
- ☐ you are complying with the deadline published in the Programme Guide.
- ☐ you have saved or printed the copy of the completed form for yourself.
- ☐ you have sent only one application form for all your mobility activities between Programme and Partner Countries as a single HEI (if you send more than one as a single HEI, please note that only the last one sent within the deadline will be processed).

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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 in pursuant to Regulation (EC) No 45/2001 on the protection of individuals with regard to the processing of personal data by the Community 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.:
- In the case of grant application forms: the evaluation of your application in accordance with the specifications of the call for proposals,
- In the case of application for accreditation forms: the evaluation of your application in accordance with the specifications of the call for proposals,
- In the case of report forms: statistical and financial (if applicable) follow-up of the projects.

For the exact description of the collected personal data, the purpose of the collection and the description of the processing, please refer to the Specific Privacy Statement accompanying this form.

You are entitled to obtain access to your personal data on request and to rectify any such data that is inaccurate or incomplete. If you have any queries concerning the processing of your personal data, you may address them to your National Agency. You have the right of recourse at any time to your national supervising body for data protection or the European Data Protection Supervisor for matters relating to the processing of your personal data.

You are informed that for the purposes of safeguarding the financial interest of the Communities, your personal data may be transferred to internal audit services, to the European Court of Auditors, to the Financial Irregularities Panel and/or to the European Anti-Fraud Office (OLAF).

http://www.edps.europa.eu/

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Declaration of Honour

To be signed by the person legally authorised to enter into legally binding commitments on behalf of the applicant organisation. Once signed it must be scanned and annexed to this application form.

I, the undersigned, certify that the information contained in this application form is correct to the best of my knowledge. I put forward a request of an Erasmus+ grant as set out in section BUDGET of this application form.

Declare that:
- All information contained in this application, is correct to the best of my knowledge.

- The organisation I represent has the adequate legal capacity to participate in the call for proposals.
EITHER
The organisation I represent has financial and operational capacity to complete the proposed action or work programme
OR
The organisation I represent is considered to be a "public body" in the terms defined within the Call and can provide proof, if requested of this status, namely:
It provides learning opportunities and
- Either (a) at least 50% of its annual revenues over the last two years have been received from public sources;
- Or (b) it is controlled by public bodies or their representatives
I am authorised by my organisation to sign Community grant agreements on its behalf.

Certify that (in case the grant requested exceeds 60 000€):
The organisation I represent:
- is not bankrupt, being wound up, or having its affairs administered by the courts, has not entered into an arrangement with creditors, has not suspended business activities, is not the subject of proceedings concerning those matters, nor is it in any analogous situation arising from a similar procedure provided for in national legislation or regulations;
- has not been convicted of an offence concerning its professional conduct by a judgment which has the force of 'res judicata';
- has not been guilty of grave professional misconduct proven by any means which the National Agency can justify;
- has fulfilled its obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which it is established or those of the country where the grant agreement is to be performed;

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- has not been the subject of a judgment which has the force of 'res judicata' for fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the Communities' financial interests;

- it is not currently subject to an administrative penalty referred to in Article 109(1) of the Financial regulations (Council Regulation 966/2012).

Acknowledge that:

The organisation I represent will not be awarded a grant if it finds itself, at the time of the grant award procedure, in contradiction with any of the statements certified above, or in the following situations:

- subject to a conflict of interest (for family, personal or political reason or through national, economic or any other interest shared with an organisation or an individual directly or indirectly involved in the grant award procedure);

- guilty of misrepresentation in supplying the information required by the National Agency as a condition of participation in the grant award procedure or has failed to supply this information.

In the event of this application being approved, the National Agency has the right to publish the name and address of this organisation, the subject of the grant and the amount awarded and the rate of funding.

Commit:

- MY ORGANISATION TO SIGN AN INTER-INSTITUTIONAL AGREEMENT WITH EACH PARTNER ORGANISATION BEFORE THE MOBILITY OF STUDENTS AND STAFF TAKES PLACE.

- my organisation to take part upon request in dissemination and exploitation activities conducted by National Agencies, the Executive Agency and/or the European Commission, where the participation of individual participants may also be required.

I acknowledge that administrative and financial penalties may be imposed on the organisation I represent if it is guilty of misrepresentation or is found to have seriously failed to meet its contractual obligations under a previous contract or grant award procedure.

Place:	Date (dd-mm-yyyy):
Name of the applicant organisation:	
Name of legal representative:	
Signature:	
National ID number of the signing person (if requested by the National Agency):	
Stamp of the applicant organisation (if applicable):	

Print Declaration of Honour

Validate

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Annexes

Please note that all documents mentioned in section "Checklist" need to be attached here before you submit your application online.

File Name	File Size (kB)	
Filename1.docx	100	REMOVE
Filename2.xlsx	200	REMOVE
		ADD
		ADD
		ADD
Total Size	300	

[MAXIMUM NUMBER OF ATTACHMENT: 10]

[MAXIMUM TOTAL SIZE OF ATTACHMENTS: 10 MB]

[ALLOWED FILE TYPES: PDF,DOC,DOCX,XLS,XLSX,JPG,TXT,ODT,ODS]

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Submission

Before submitting the form electronically, please validate it. Please note that only the final version of your form should be submitted electronically.

Data Validation

Validation of compulsory fields and rules — Validate

Standard Submission Procedure

Online submission (requires internet connection) — Submit Online

Alternative Submission Procedure

If you cannot submit your form online you can still do it by sending an email to your National Agency within the 2 hours following the official deadline. The email must contain the complete electronic form and any file attachments you wish to send. You must also attach a snapshot of section "Submission Summary" indicating that this electronic form could not be submitted online. Your National Agency will analyse your situation and provide you with further instructions.

Submission Summary

This table provides additional information (log) of all form online submission attempts, particularly useful for the National Agencies in case of multiple form submissions.

Number	Time	Form Hash Code	Submitted	Description
1	2014-03-21 17:51:23 (Brussels, Belgium Time)	0000000000000000	Yes	Your submission was successful. Submission ID: 1000785

Local Time cannot be considered authoritative and cannot be used for claiming that the form has been submitted in time.

Form Printing

Print the entire form — Print Form

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