EMPL C - Social Affairs EMPL C.3 - Disability & Inclusion

Call for proposals: Call for proposals to promote and protect the rights of

persons with disabilities

Reference: VP/2019/016
Budget heading: 33.02 02

# GRANT APPLICATION FORM VP/2019/016

### A: Applicant

### A.1: Applicant organisation

A.1.1 Name of the organisation
A.1.2 Abbreviation
A.1.3 Departments
A.1.4 Type of organisation
A.1.5 Address
A.1.6 Postal code
A.1.7 City
A.1.8 Country
A.1.9 Telephone
A.1.10 Fax
A.1.11 E-mail address
A.1.12 Registration number
A.1.13 VAT number
A.1.14 Web site
A.1.15 Legal entity form
A.1.16 Financial identification form.
A.1.17 Declaration on honour
A.1.18 Supplementary space for additional documents (if needed)
A.1.19 Supplementary space for additional documents (if needed)
A.1.20 Supplementary space for additional documents (if needed)
A.2: Legal representative
A.2.1 Title
A.2.2 Surname
A.2.3 Forename
A.2.4 Gender
A.2.5 Function
A.2.6 Other function
A.2.7 Telephone
A.2.8 Fax
A.2.9 E-mail address
A.3: Person responsible for managing the action

A.3.1 Title.....

A.3.2	Surname
A.3.3	Forename
A.3.4	Gender
A.3.5	Function
A.3.6	Other function
A.3.7	Telephone
A.3.8	Fax
A.3.9	E-mail address

# Co-Applicants

### **B:** Co-Applicants involved in the action

### 1:

P1/B.1.1 Name of the organisation.
P1/ B.1.2 Abbreviation
P1/ B.1.3 Departments
P1/ B.1.4 Type of organisation
P1/ B.1.5 Address
P1/ B.1.6 Postal code
P1/ B.1.7 City
P1/ B.1.8 Country
P1/ B.1.9 Telephone
P1/ B.1.10 Fax
P1/ B.1.11 E-mail address
P1/ B.1.12 Registration number
P1/ B.1.13 VAT number
P1/ B.1.14 Web site
P1/ B.1.15 Legal entity form
P1/ B.1.16 Mandate
P1/ B.1.17 Declaration on honour
P1/ B.1.18 Letters of commitment (as specified in the call)
P1/ B.1.19 Supplementary space for additional documents (if needed)
P1/ B.1.20 Supplementary space for additional documents (if needed)
P1/ B.1.21 Supplementary space for additional documents (if needed)

# **Associate Organisations**

### **C:** Associate Organisations

### 1:

P1/ C.1.1	Name of the organisation.
P1/ C.1.2	Abbreviation
P1/ C.1.3	Type of organisation
P1/ C.1.4	Address
P1/ C.1.5	Postal code
P1/ C.1.6	City
P1/ C.1.7	Country
	Letters of commitment (as

### Third Parties

### **D: Third Parties**

### 1:

P1/ D.1.1	Name of the organisation.
P1/ D.1.2	Abbreviation
P1/ D.1.3	Type of organisation
P1/ D.1.4	Address
P1/ D.1.5	Postal code
P1/ D.1.6	City
P1/ D.1.7	Country
	Letters of commitment (as in the call)

### Oper. and finan. capacity

### E: Operational and financial capacity

### E.1: Operational structure

E.1.2 Administrative structure of each applicant organisation.....

E.1.3 Members of each applicant organisation.....

E.1.4 Staff employed by each applicant organisation in the relevant field.....

#### E.2: Financial resources

E.2.1 Usual sources of finance of each applicant organisation......

E.2.2 Turnover or equivalent for the last financial year of each applicant organisation.....

E.2.3 Any other information demonstrating financial capacity.....

### E.3: Previous grants and current grant applications

#### E.3.1 Previous Action Grants

(1) Previous grants received for which the final report and the final financial statement have not yet been received or approved by the Commission and/or (2) Any other Union grants obtained during the last three years.

organisation	European institution, service responsible and programme	Agreement no.	Year of the award	Amount of the grant (in EUR)

#### E.3.2 Action Grant applications in the current year

Has your organisation presented or does it intend to submit other applications for support in the current year to Commission services or to other Union institutions/Agencies? (please specify the Directorate General, the programme or the initiative concerned, the title of the action and no. of agreement if applicable and the state of play of your application).

 European institution, service responsible and programme	Title of the action	Estimated amount of the grant (in EUR)

#### E.3.3 Operating grants

Have any of the applicant organisations applied for or obtained an operating grant from the European Commission or any other Union institution?

Applicant organisation	European institution, service responsible and programme	Agreement no.	Estimated amount of the grant (in EUR)	Start date	End date

### Action

### F: Information on the action for which the grant is requested

F.1	Title		
F.2	Short summary of the action		
F.3	Specific objective(s)		
F.4	<b>Duration of activities</b>		
	F.4.1 Start		
	F.4.2 Duration (in months)		
F.5	Implementation of the action		
F.6	Workplan		
F.7 Will you subcontract any task			

#### F.8 Timetable for action events

Please enter the key dates for the main events of the action (i.e. conferences, project meetings and so on).

Start date	End date	Venue	Type of event

F.9 R	coles and responsibilities
F.10	Targeted groups / sectors
F.11	Transnational dimension
	Arrangements for evaluation / oring of the action
	Added value / innovativeness action
F.14	Expected results
	Use of results (multiplier s and dissemination plans)
F.16 I	Language for correspondence.

### **Annexes**

### **G: Annexes**

G.1	Detailed work programme
G.2	Budget explanation
G.3	List of main projects
	Supplementary space for tional documents (if needed)
	Supplementary space for tional documents (if needed)
	Supplementary space for tional documents (if needed)
	Supplementary space for tional documents (if needed)

### Total cost of the action

Total eligible costs (D + I)

### Total eligible direct costs (D)

Heading 1 - Staff costs
Management
Administration
Secretariat
Accounting
Other staff
Total - Staff costs
Heading 2 - Travel, accommodation and subsistence allowances
Travel
Subsistence allowances (accommodation, meals, etc.)
Total - Travel, accommodation and subsistence allowances
Heading 3 - Costs of services
Information dissemination
Translations
Reproductions and publications
Specific evaluation
Interpretations
External expertise
Other services
Total - Costs of services
Heading 4 - Administration costs
Depreciation for purchase of equipment
Hire of rooms
Hire of interpreting booths
Audits
Financial services
Other administrative costs
Total - Administration costs

### Total eligible indirect costs (I)

### **Heading 5 - Overheads**

Total overheads.....

### Total revenue of the action

### Income

### Income

Applicant's contribution
Total financial contribution (own resources)
Revenue generated by the action
Union grant
Total Income

### Management/Coordination (transnational and national)

	Name of the organisation	Types of employment (permanent/ temporary) and work patterns (full-time/part-time)	Indicative daily salary cost	Number of days	Total

Total cost of management/coordination.....

### Implementation of the project

ŕ	,		Indicative daily salary cost	Number of days	Total

Total cost of Implementation of the project.

#### Secretarial cost

ŕ	 J	 Indicative daily salary cost	Number of days	Total

Total cost of secretarial.....

### Accounting

Incu	·	 organisation	7.	Indicative daily salary cost	Number of days	Total

Total cost of accounting.....

#### Other staff

·	, ,	- ·	Indicative Daily Salary cost	Number of days	Total

| Total cost  | of Other | staff | <br> |
|-------------|----------|-------|------|------|------|------|------|------|------|------|------|
| Total staff | f costs  |       | <br> |

# Heading 2 - Travel, accommodation and subsistence allowances

#### Travel, accommodation and subsistence allowance

The "Daily cost per person" covers accommodation costs and the daily subsistence allowance (DSA).

by	the travel	travel cost per person	 total	per person	people	and accommoda sub-total	
Total of trav	rol coete						

Incurred Purpose of Place of Average Number of Travel sub- Daily Cost Number of Number of Subsistence Total

Total of trav	el costs											
	otal of travel costs											
lotal of Sub	sistence and	accommod	ation costs.									
Total - Trave	el, accommo	dation and s	ubsistence a	allowances								

# Heading 3 - Cost of services

# Incurred by Nature of costs Quantity Unit cost Total

Total information dissemination.

#### **Translations**

Total number of languages (the document is translated to), cost per page (1 page=1500 characters without blanks)

Description of documents to be translated	 Total number of languages	Cost per page	Number of pages	Total

Total translations.....

#### Reproductions and publications

Incurred by	Document	Number of pages	Unit cost	Total

Total reproductions and publications.....

### Specific evaluation

	Incurred by	Evaluator	Cost	Total
ſ				

Total specific evaluation....

#### Interpretations

Incurred by	Meeting	55	Number of interpreters	Daily cost per interpreter	Total

Total interpretations.

### **External expertise**

Incurred by	Task	Number of days	Daily cost	Total

Total external expertise

#### **Other Services**

Incurred by	Service	Amount	Total

Total other services.....

Total - Costs of services.

# Heading 4 - Administration costs

-			Type of equ	ipment		Estin	nated depreciati	on cost
otal depreciation	on							
Hire of rooms								
Incurred by	Meeting		Number of o	days Unit cos	st per day	Num	ber of rooms	Total
otal hiro of roo	ms							
otal fille of 100	III5	•••••						•••••
Hire of interpre	eting booths							
Incurred by	Meeting	Lang	uages	Number of booth	Number o	f days	Unit cost per d	ay Total
		Auditor		Cost			Total	
Incurred by		Auditor		Cost			Total	
Incurred by  Total audits		Auditor		Cost			Total	
Incurred by  Total audits  Financial costs	3	Auditor	Qu	Cost	Unit c	ost	Total	al
Audits Incurred by Total audits Financial costs Incurred by Total financial co	Nature		Qu		Unit c	ost		al
Incurred by  Total audits  Financial costs Incurred by  Total financial co	Nature		Qu	antity	Unit c	ost	Tot	al
Incurred by  Total audits  Financial costs  Incurred by  Total financial costs	Nature			antity	Unit c		Tot	al
Incurred by  Total audits  Financial costs  Incurred by  Total financial co  Other administ  Incurred by	Nature	e of costs		antity	Unit c		Tot	al

# Heading 5 - Overheads

### **Applicant's overheads**

Overheads are not eligible for operating grants

Incurred by	Amount

Total......

# Heading 6 - Income

renue generated by the action (R).	
Union grant (S = T - C - R)	
Total financial contribution (own res	sources) (C = C1 + C2 + C3)
olicant's Contribution (C1)	
Co-applicants' contribution (C2)	
	icant has to include the amount of its affiliated entities participating in this action
Co-applicant Co-applicant	Contribution
Total co-applicants' contribution (C2)	
Third parties' contribution (C3)	
Third party	Contribution

### Signature

### I: Signature of the legal representative

Warning: If the legal representative does not sign, the Commission will automatically reject the application.

- $I.1\ I$ , the undersigned, authorised to represent the applicant, certify that the information contained in this application is correct and complete.
- I.2 Name
- I.3 Date and place
- I.4 Signature