***PARTNER FORM***

***(REGIONAL OFFICE OF THE LODZ VOIVODSHIP DATABASE)***

|  |  |
| --- | --- |
| **INSITUTION DATA** | |
| Pic number |  |
| Name |  |
| Address |  |
| Website |  |
| E-mail |  |
| Telephone |  |
| Fax |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **LEGAL FORM OF THE INSTITUTION** | | | | |
| Type of institution | Public body |  | Private body |  |
| Unit of Local Government (ULG) or ULG association |  | Company |  |
| Higher Education Institution |  | Non-governmental organization |  |
| If other please specify: | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **We are interested in international projects regarding:** | EDUCATION AND TRAINING |  | RESEARCH AND DEVELOPMENT |  |
| CULTURE AND ART |  | BUSINESS SOLUTIONS |  |
| SOCIAL ISSUES |  | POLITICS and LOCAL STRATEGIES |  |
| INNOVATION |  | ENVIRONMENTAL PROTECTION |  |
| ORGANIC AGRICULTURE |  | URBAN POLITICS |  |
| SPORT |  | SMART CITIES |  |
| TRANSPORT AND LOGISTICS |  | other |  |
| If other please specify: | | | | |

|  |  |  |
| --- | --- | --- |
| **Contact person** | | |
| First name |  | |
| Surname |  | |
| Position |  | |
| E-mail |  | |
| Telephone |  | |
| Address, if other than of the organization | 🞎 Yes | 🞎 No |
| Address | If YES please fill in the fields | |