

Associated Partner Declaration

This form is a Programme template and may not be altered or amended in any way.

This document is an annex to the Application Form and will be (updated, if necessary and) annexed to the Consolidated Application Form if the project is approved

Project proposal acronym: *[Acronym]*

I, the undersigned *[Title, First Name, Last Name]* declare, as the legal representative of *[Name of the organisation in original langue, Name of the organisation in English]*, that my institution supports the overall objective of the project as described in the application form by performing the following role:

[Application Form B.1.8 the role]

I confirm that the institution I represent commits itself as an associated partner until the end of the project activities, and that in this framework, no contractual or subcontractual link will be established with one or several project partners.

- / /

.....
Signature

.....
Place and Date

[Title, First Name, Last Name]

.....
Name of the Signatory

Official stamp of the signing organisation (if applicable)