



	To be completed by the Foundation EVZ	
	Received:	Ref:
A f	<b>EET UP! German-Ukrai</b> funding programme of the d Future"	ian Youth Encounters  Foundation "Remembrance, Responsibility
Аp	plication for Projects in 20	117
		project application. Please provide a <b>short and concise</b> answer to each e length of your responses to the size of the text field.
	ase sign the form and send the original (b st,to:	post, fax or email) as soon as possible, but by 11 December 2016 at the
	Foundation "Remembrance, Responsibi Meet up! German-Ukrainian youth enco Ms Evelyn Scheer Lindenstrasse 20-25 D-10969 Berlin meetup@stiftung-evz.de Fax: +49 (0) 30 25 92 97-11	
	n if you have sent the application by fax o d above.	email (scanned), <b>please send a signed original copy by post</b> to the add
1.	PROJECT NAME	
2.	BRIEF DESCRIPTION OF THE F Please briefly describe in 3–5 sentence will result from the project work.	<b>ROJECT</b> s which content and questions your project will address, and what project will address.
3.	PROJECT FINANCING	
	Total costs	Euro
	Applied for from the Foundation	Euro
	Own funds or participant contributions	Euro
	Third-party funds	Euro

# 4. INFORMATION ON THE PROJECT PARTNERSHIP

## 4.1 Applicant (from Germany or Ukraine)

Details of the main contact person in the project who, as grant recipient, accepts responsibility for managing the funding if the project is approved.

<b>•</b>	Name of institution
•	Main area of work, tasks and objectives of the institution (For extracurricular organisations: please also send statute and documentation of charitable status)
•	How many educational staff does the institution have?
•	What audiences take advantage of the organisation's educational offerings?
	Charact have an
•	Street, house no.
<b>•</b>	Post code ► Town/city: ► Country
<b>•</b>	Phone ► Fax
<b>•</b>	Email address of the institution
<b>•</b>	Website of the institution
•	Head of the institution/legal representative/applicant (Please specify the exact title, for example director, general manager, chairman/chairwoman and attach the statutes or documents that set out the rules on legal representation)
<b>•</b>	Name of main contact person for the project (Please name only one person for the communications with the Foundation EVZ)
<b>•</b>	Position of contact person
•	Phone no. of contact person
<b>•</b>	Email address of contact person

# 4.2 Project partner from Germany or Ukraine (obligatory)

•	Name of in	stitutio	n							
•	Main area of work/Organisational profile (For extracurricular organisations: please also send statute and documentation of charitable status)									
•	Street, hou	se no.								
•	Post code			<b>▶</b> T	own/city:				► Country	
•	Phone						▶ Fax			
•	Email addr	ess of t	he institu	ıtion						
•	Website of	the ins	titution							
•									ct title, for example al representation)	e director, general manager,
<b>•</b>	Name of m	ain con	tact perso	on for	the projec	t (Please	name only	one person for t	he communications	with the Foundation EVZ)
<b>•</b>	Position of	contac	t person							
•	Phone no. o	of conta	act persor	1						
•	Email addr	ess of c	ontact pe	erson						
	3 If applic		-	rojec	t partner	from C	iermany	, Ukraine or	·Russia (optio	nal)
•	► Main area of work/Organisational profile (For extracurricular organisations: please also send statute and documentation of charitable status)									
•	Street, hou	se no.								
•	Post code			<b>▶</b> T	own/city:				► Country	
•	Phone						<b>▶</b> Fax			
•	Email address of the institution									
•	➤ Website of the institution									

► Head of the institution/legal representative (Please specify the exact title, for example director, general manager, chairman/chairwoman and attach the statutes or documents that set out the rules on legal representation)					
► Name of main con	tact person for the	project (Please name	only one person for the com	nunications with the Foundation EVZ)	
<ul><li>Position of contact</li></ul>	t person				
▶ Phone no. of conta	ct person				
► Email address of co	ontact person				
4.4 When did the	partnership be	egin?			
Have any joint nr	niects already h	een carried out	? If yes, please fill in th	ne following table	
Theme		When?	Where?	Funded by	
			- Trincici	l unded by	
	IFORMATION (	ON PROJECT			
	nformation on the i			s) and project managers.	
The number of a twelve or more		ons should not exc	eed a ratio of 1:6, for ex	ample two project staff and	
Country:	Germany	Ukraine	Russia	Total	
Young people					
Project managers					
Total					
Age of the young part (Must be between 16 a					

<b>5.2 Expected period of implementation</b> (minimum 5–7 days per encounter, arrival and departure days count as half days)					
	Town/towns, country	from DD.MM.YYYY	until DD.MM.YYYY		
Encounter1 (obligatory)					
Encounter 2 (optional)					
formulate your project <b>6.1 On which theme wi</b>	n only support projects that clearly relate to the themes of description in <b>short and concise</b> full sentences. Il the project focus? be addressed in the project?	of the call for applic	cations. Please		

# 6.2 What specific aims do you hope to achieve with this project? Social importance: Please describe the desired effect of the project on its environment (e.g. your organisation, your school, your association) and beyond: Significance of the project for the participants (young participants and project managers)?

c)	What will be changed both locally and for the participants after the project has ended? Please define specific <b>criteria</b> with which you will be able to evaluate the success of the project. How can you ensure that the objectives set under a) and b) above are met?

6.3	6.3 How will the participants be recruited and selected? How will the young people participate in the preparation, planning and implementation of the project?		
7. Die	PROJECT RESULTS AND PRESENTATION  ease limit yourself to only one (or maximum two) formats for the results of your project!		
a)	What products will result from the project (e.g. exhibit, film, publication, theatre performance, podium discussion,		
u)	blog, website, etc.)?		
b)	In what quantity will your <b>product</b> or results be produced for circulation, if applicable?		
c)	How will the project results be made available, and to what target group? How will you manage press		
L)	and public relations for the project?		
d)	In what form will the project be presented in public? In what context will <b>presentations</b> take place?		
u)	in what form will the project be presented in public? In what context will <b>presentations</b> take place?		
e)	What is your project/organisation's Facebook page? (Not required for funding)		
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### 8. INFORMATION FOR THE APPLICATION FOR MEET UP!

8.1	Has one of the participating institutions already received support from the Foundation "Remembrance, Responsibility and Future"? If yes, when and for which project(s)? (Please quote the date and reference number of the approval):						
	Project name	When?	Reference number				
8.2	ANNEXES						
	The annexes marked ☑ must be submitted in a be by ticking the appropriate boxes.	<b>inding manner.</b> If you attac	h further annexes, please indicate this				
	☑ Costs and financing plan (see template/annex	x Excel file)					
	<b>Copies of the statutes</b> (please mark the section where the legal representative is named) In case of doubt please attach an extract of a valid official registration.						
	✓ Copy of the certificate of charitable status (Nation tax inspection/audit documents)	lotice of tax exemption or co	ppy of the last				
	☑ Programme for the encounters (see template	/annex in this document)					
	Copies of notifications of approval from other	donors					
	Presentation materials or leaflets on the proje with historical and political education, human		·				

# 8.3 The applicant herewith declares that all information included in this application is correct and that the project application was drawn up together with all project partners.

You confirm that you have read the conditions of grant approval and the information on the selection procedure and communications. In the event that the project is approved, you also agree that the results may be published and stored in the archive of the Foundation "Remembrance, Responsibility and Future".

Signatures of the heads (legal representatives) of all participating organisations.

Applicant:						
Town/city, Date	Head/Applicant I legal signatures	Name in capitals				
<b>Project Partners:</b> (The signatures may be att original signatures by post.	ached as a scan or submitted by fax. Please also si )	ubmit the application with				
Town/city, Date	Head/Project partner II legal signatures	Name in capitals				
Town/city, Date	Head/Project partner III  legal signatures	Name in capitals				

# ANNEX I: PROGRAMME FOR THE ENCOUNTERS

Please provide a brief summary of the project content and timeframe.

Project name			
a) First encou	unter and project work with partner gr	oups (obligatory)	
in (Town, Country)		from	until
Date (DD.MM.YYYY)	Programme (In this column please outline the thematic focus	of each day of the encounter,	and the format of the joint group work.)
b) Second end	counter and project work with partner	groups (optional)	
in (Town, Country)		from	until
Date (DD.MM.YYYY)	Programme (In this column please outline the thematic focus	of each day of the encounter,	and the format of the joint group work.)

c) Presentation, if applicable (optional)					
in (Town, Country)	from	until			
<b>Programme</b> (Please provide a brief description of the format, content	t and target audience of the presentation.)				