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|  | Partnership form – project funding cultural heritage | | | | | | | | | | | | | | | | | | | CJM-CED 2021\_v 2024 | | | |
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|  | Departement of Culture, Youth and Media  **Culture – Cultural Heritage Team**  **T** 02 553 69 67  [cultureelerfgoed@vlaanderen.be](mailto:cultureelerfgoed@vlaanderen.be)  [www.vlaanderen.be/erfgoed](http://www.vlaanderen.be/erfgoed) | | | | | | | | | | | | | | | | | | | | | | |
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|  | ***What is the purpose of this partnership agreement?***  This partnership form is uploaded via the [KIOSK](https://kiosk.vlaanderen.be/kiosk/public/login.cjsm) web application as an attachment to the project grant application for a cultural heritage project.  Explain how the aim of the partnership fits with the aim of the project. The project partner explains their organisation’s contribution in terms of content, methodology and financial resources.  A separate form is filled out for each project partner. The partner organisation must sign and date the form.  Please note that you can only add one attachment in KIOSK. You need to merge the partnership forms into one PDF (max. 2 MB). | | | | | | | | | | | | | | | | | | | | | | |
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|  | Project details | | | | | | | | | | | | | | | | | | | | | | |
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| 1 | **Insert project name:** | | | | | | | | | | | | | | | | | | | | | | |
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| 2 | **Insert applicant’s name:** | | | | | | | | | | | | | | | | | | | | | | |
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| 3 | **Insert project duration:** | | | | | | | | | | | | | | | | | | | | | | |
|  | Period: from | | day |  | | month | |  | | year | |  | | to | | | day |  | month | |  | year |  |
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|  | Project partner details | | | | | | | | | | | | | | | | | | | | | | |
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| 4 | **Fill in the details of the project partner.**  Give each partner a separate number. | | | | | | | | | | | | | | | | | | | | | | |
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|  | Number |  | Name partner organisation | | | | | | | | | | | | |  | | | | | | | |
|  |  |  |  | | | | | | | | | | | | |  | | | | | | | |
|  | Street address | |  | | | | | | | | | | | | | | | | | | | | |
|  | Postal code and city | |  | | | | | | | | | | | | | | | | | | | | |
|  | Country | |  | | | | | | | | | | | | | | | | | | | | |
|  | Phone number | |  | | | | | | | | | | | | | | | | | | | | |
|  | E-mail | |  | | | | | | | | | | | | | | | | | | | | |
|  | Website | |  | | | | | | | | | | | | | | | | | | | | |
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| 5 | **Provide a short description of the partner organisation.** | | | | | | | | | | | | | | | | | | | | | | |
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|  | Role and contribution of the project partner | | | | | | | | | | | | | | | | | | | | | | |
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| 6 | **Provide a detailed description of the partner’s role in the project.** | | | | | | | | | | | | | | | | | | | | | | |
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| 7 | Describe the partner's contribution in terms of content, methodology and financial resources. | | | | | | | | | | | | | | | | | | | | | | |
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|  | Signature by the partner organisation | | | | | | | | | | | | | | | | | | | | | | |
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| 8 | **Declaration.** | | | | | | | | | | | | | | | | | | | | | | |
|  | 1. I declare that the information contained in this form is correct and complete. 2. I confirm that I have read the partnership form and fully agree with it. 3. I declare that the partner organisation will carry out the role and contribution as specified. | | | | | | | | | | | | | | | | | | | | | | |
|  | Date | | day | |  | | month | |  | | year | |  | |  | | | | | | | | |
|  | Signature | |  | | | | | | | | | | | | | | | | | | | | |
|  | Full name | |  | | | | | | | | | | | | | | | | | | | | |
|  | Position in organisation | |  | | | | | | | | | | | | | | | | | | | | |