**Brief description of Swiss partner involvement in project implementation**

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| --- | --- |
| Name of Swiss Partner Organisation/Institution/Company: | |
| Full name of contact person and their role in the organisation: | |
| Email: | |
| Phone Number: | |
| Type of organisation[[1]](#footnote-1): | * Public administration * Academic/ Research organisation * Enterprise * NGO * Other – please specify |
| Brief description of the project topic: | |
| Brief description of the expertise and experience of the Swiss partner relevant to the project topic: | |
| Description of all tasks the Swiss partner will be responsible for in the project implementation including a list of all activities and deliverables in which the Swiss partner will participate. | |
| Expected time of the Swiss partner involvement in project implementation: | |
| Expenses foreseen for implementing the tasks. | |

Date: Name and signature of authorised person:

1. Delete as appropriate. [↑](#footnote-ref-1)