Annex F: Agreement of Cooperation with an Associate Partner

**AGREEMENT OF COOPERATION WITH AN ASSOCIATE PARTNER**

|  |  |
| --- | --- |
| **Full legal name of associate partner** |  |
| Address |  |
| City |  |
|  |
| Name and surname of legally authorised representative  |  |
| Position |  |
| Telephone |  |
| E-mail |  |
|  |
| Name and surname of the contact person  |  |
| Position |  |
| Telephone |  |
| E-mail |  |

If the applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(title of the applicant)*  will be selected for co-financing by the Ministry of Public Administration at the **Call for Proposals: Enabling Environment for Non-Governmental Organisations Development 2019-2023**, with the program/project \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(title of the project)* we, as the associated partner, will cooperate in the implementation in following ways:

Upon ending the project *(tick appropriately)*

[ ]  We do not see the need to cooperate with the applicant/partners after ending the project

[ ]  We intend to cooperate with the applicant/ partners in the continuation of project in following ways:

*Stamp of associate partner and signature of the legally authorised representative*

|  |  |
| --- | --- |
| Stamp | Signature |
|  |  |