



Education and Culture
Lifelong Learning Programme
COMENIUS

LIFELONG LEARNING PROGRAMME Comenius

APPLICATION FORM

for

grants to attend in-service training activities for staff
involved in school education

2007

To be returned to:

Basic data :

Family name and first name of applicant:	
Name of applicant's institution :	
Closing date (please tick one):	<p>30 March 2007:</p> <ul style="list-style-type: none"><input type="checkbox"/> for training starting between 1 June 2007 and 30 September 2007<input type="checkbox"/> 31 May 2007 (for training starting between 1 October 2007 and 31 January 2008)<input type="checkbox"/> 31 October 2007 (for training starting between 1 February 2008 and 31 March 2008)

Reserved for the National Agency

Application deadline

Registration number

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EUROPEAN COMMISSION

GENERAL INFORMATION

Before completing the form, please read the relevant sections in the *Lifelong Learning Programme (LLP) Guidelines for Applicants* and the appropriate annual Call for Proposals. These documents can be downloaded from: http://ec.europa.eu/education/programmes/newprog/index_en.html

You should consult the website of your own National Agency for further information and for the Agency address to which your application should be sent: http://ec.europa.eu/education/programmes/newprog/index_en.html

- This form can be used to apply for both general in-service training activities and for language training activities. Please ensure that you answer the relevant questions for the activity you wish to attend.
- Before completing the form, you should check with the training provider that places are still available for the activity you wish to attend. If the organiser requires payment of a pre-registration fee, you should be aware that you will have to cover this cost yourself if your National Agency does not award you a grant.
- As soon as the National Agency approves your application you must confirm your attendance to the training organiser. If you decide not to attend an activity for which you have been awarded a grant, you will be responsible for paying cancellation fees if the training provider claims them. Only in cases of illness or death of relatives or of the applicant will the National Agency pay the cancellation fee using the money of the grant.
- The form should be printed from a computer (word-processor).
- In the case of grouped applications (only possible for applicants for language training activities, max. 10 members), the coordinator of the group must send the individual applications duly completed and signed by the individual applicants plus an explanatory letter signed by the coordinating institution.
- It is intended that resources allocated to this Action reach as many individuals as possible. As a result, priority will be given to applicants who have not already received a grant for in-service training under a Lifelong Learning Programme predecessor (Socrates, Leonardo da Vinci) in the previous two years.
- In accordance with standard Commission practice, the information provided in your application form may be used for the purposes of evaluating the Lifelong Learning programme. The relevant data protection regulations will be respected.

ELIGIBILITY CHECK-LIST

- You are an individual applying from a country participating in the Lifelong Learning Programme. Please check with your National Agency or consult the Lifelong Learning Programme website for further details.
- The application has been submitted according to the application procedures set out in the Guidelines for Applicants.
- The application form has been completed in full using one of the official languages of the EU, or, in the case of the EFTA/EEA or candidate countries, in the national language of the country concerned.
- The application form and the copy bear the original signature of both the applicant and of the person legally authorised to sign on behalf of the applicant institution, plus the original stamp of the institution/organisation.

RETURN ADDRESS

Please return this application form and one copy to your National Agency.

You can find the addresses of the National Agencies in the annual Call for Proposals or by consulting the Lifelong Learning Programme website: http://ec.europa.eu/education/programmes/newprog/index_en.html

Acknowledgement of Receipt

This page will be returned to you when we have received and registered your application form. For this purpose, please complete the section below:

Application for:	Comenius in-service training activity
Family and first name:	
Name of institution/organisation:	
Institution/organisation street name and number:	
Post code and town/city:	
Country:	

Reserved for the National Agency

We acknowledge receipt of your application:

Please use this number in all communication with your National Agency.

Place:

Date:

Signature:

Stamp of the National Agency:

A. Applicant – General Profile

1. Family name	<input type="text"/>	Mr <input type="checkbox"/> Ms <input type="checkbox"/>
2. First name	<input type="text"/>	
3. Date of birth	<input type="text"/>	
4. Nationality	<input type="text"/>	
5. Full legal name of institution/organisation at which you work in national language	<input type="text"/>	
6. Present position	<input type="text"/>	
Number of years in position	<input type="text"/>	
7. Institution's full address <i>[This address will be used for correspondence during the school term]</i>	Street name and number: Post code and town/city: Region: Country: Website:	
8. Telephone <i>(include country and area code)</i>	<input type="text"/>	
9. Fax <i>(include country and area code)</i>	<input type="text"/>	
10. E-mail	<input type="text"/>	
11. Private address <i>[This address will be used for correspondence during school holiday periods]</i>	Street name and number: Post code and town/city: Region: Country:	
12. Telephone <i>(include country and area code)</i>	<input type="text"/>	
13. Mobile telephone <i>(include country code)</i>	<input type="text"/>	
14. E-mail	<input type="text"/>	

Further Information

<p>15. For LANGUAGE TRAINING ACTIVITIES please indicate to which of the following eligible categories of educational staff you belong:</p>	<ul style="list-style-type: none"> <input type="checkbox"/> a qualified and practising teacher of an official language of the EU (or Luxembourgish) as a foreign language <input type="checkbox"/> a trainer of foreign language teachers <input type="checkbox"/> a teacher re-training as a foreign language teacher <input type="checkbox"/> a primary or pre-primary teacher whose responsibilities include or will in the future include teaching foreign languages <input type="checkbox"/> a teacher of other subjects through the medium of a foreign language <input type="checkbox"/> a language teacher re-entering the profession after a period away from teaching <input type="checkbox"/> an inspector or advisor in the field of language teaching <input type="checkbox"/> other, namely:
<p>If you are applying for training in pure language skills (i.e. not methodology), to which category of eligible education staff do you belong [choose one only]?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> person teaching another subject in schools through the medium of a foreign language <input type="checkbox"/> teacher retraining as a school foreign language teacher <input type="checkbox"/> school staff participating in a Comenius Partnership and requesting training in a Partnership language <input type="checkbox"/> school teacher requesting training in a less widely used and less taught language for teaching purposes
<p>If relevant: Approximately how many hours and pupils per week do you teach in the foreign language(s)?</p>	<p>No. of hours: _____ No. of pupils: _____</p>
<p>16. For GENERAL IN-SERVICE TRAINING ACTIVITIES please indicate to which of the following eligible categories of educational staff you belong:</p>	<ul style="list-style-type: none"> <input type="checkbox"/> teacher (including those in pre-primary and vocational training) <input type="checkbox"/> head teacher <input type="checkbox"/> education manager <input type="checkbox"/> school inspector <input type="checkbox"/> counsellor or careers advisor <input type="checkbox"/> staff working with pupils at risk of social exclusion, such as mediators and street educators <input type="checkbox"/> staff involved in intercultural education or working with children of migrant workers, gypsies and travellers, and occupational travellers <input type="checkbox"/> staff working with pupils with special educational needs <input type="checkbox"/> other, namely:

5. Dates of training activity(dd/mm/yy)	Beginning: _____ End: _____
6. Place of training activity	Country: _____ Town: _____
7. Please indicate in which language the training is to be delivered.	
8. In relation to the above question on language, please give details of your fluency in the language(s) of the training event, indicating for example qualifications obtained, language courses followed, time spent in the foreign country. <i>[Funding may be available for language preparation]</i>	
9. If your training is specifically intended to develop skills in any of the following areas, please tick and explain in what way:	<p>Skills necessary to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> implement Content and Language Integrated Learning (CLIL) <input type="checkbox"/> implement holistic language policies at school <input type="checkbox"/> use observation and reflection to update and improve teaching strategies <input type="checkbox"/> undertake classroom-based research into teaching methods and approaches <input type="checkbox"/> implement team-teaching and other collaborative working methods <input type="checkbox"/> prepare for positions of leadership within the school <input type="checkbox"/> teach classes of mixed composition (in terms of abilities, mother tongues or cultures) <p>Please explain how the training is intended to help you develop these specific skills:</p>

C. Further Details

1a.	How will the event provide you with further training which you need?	
b.	Please indicate who has identified this need:	<input type="checkbox"/> You <input type="checkbox"/> Supervisor <input type="checkbox"/> Mentor <input type="checkbox"/> Other colleagues <input type="checkbox"/> Head of Institution <input type="checkbox"/> Education authority at national, regional or local level <input type="checkbox"/> Other, namely:
2.	What impact do you expect the in-service training activity to have on your institution (and pupils if applicable)?	
3.	What contribution will your participation in this in-service training activity make to the European dimension of your institution?	
4.	How will this in-service training activity contribute to your institution's involvement in the Lifelong Learning Programme?	

5.	<p>Please give details on how you propose to prepare for your in-service training.</p> <p><i>[Thorough preparatory work will be a significant criterion in selecting applications for support]</i></p>	
6.	<p>How will your participation in the training be evaluated?</p> <p><i>[Tick as many boxes as apply]</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Evaluation by you yourself following the training e.g. in the form of a report/questionnaire (This would be in addition to the obligatory report provided by you to your National Agency following the training event) <input type="checkbox"/> Evaluation by training provider – e.g. in the form of a written statement/ report <input type="checkbox"/> Evaluation session conducted between you yourself and supervisor/mentor/colleagues <input type="checkbox"/> Testing of new teaching methods/skills on a selection of different learners <input type="checkbox"/> Long term evaluation by means of regular assessment of teaching strategies <input type="checkbox"/> Other form, namely:
7.	<p>How and to whom do you propose to provide feedback on the outcomes of the training and the new knowledge/skills you have acquired?</p> <p><i>[Tick as many boxes as apply]</i></p>	<p>To whom:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Supervisor <input type="checkbox"/> Mentor <input type="checkbox"/> Other colleagues <input type="checkbox"/> Head of Institution <input type="checkbox"/> Local Schools <input type="checkbox"/> Education authority at national, regional or local level <input type="checkbox"/> Other, namely: <p>How:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Written Report <input type="checkbox"/> Oral Report <input type="checkbox"/> Other, namely:

Applicants for LANGUAGE TRAINING ACTIVITIES answer the additional question

8. Under the headings below please detail the expected impact of the language training activity on your institution and pupils (if applicable):

a. Impact on the diversification of the foreign language teaching programme

b. Impact on the teaching of the least widely used and least widely taught languages

c. Other types of impact

D. Budget Summary and Financial Request

Before filling out this section please read the ANNEXES at the back of this form

Cost item	Description	Cost (in Euro)
<i>Course fee or training event fee</i>		
<i>Travel</i>	Travel: <i>From (place):</i> <i>To (place):</i> <i>Type of transport:</i>	
<i>Subsistence (i.e. accommodation and living expenses, travel insurance)</i>	<i>Date of departure:</i> <i>Date of return:</i> <i>Total duration of training activity (days¹):</i> <i>Total number of overnight stays abroad:</i>	
<i>Other costs if applicable, e.g. language preparation , entry / exit visas</i>		
<i>Total budget</i>		
<i>Comenius grant requested²</i>		

If disadvantaged, for example due to a handicap or for socio-economic reasons, please give details so that your grant may be increased.	
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¹ Structured training courses will normally have a minimum duration of 5 full working days; other training may be shorter.

² Please carefully check the budget summary, and especially the section on travel costs, to ensure that your grant request is realistic but sufficient to cover the planned activities. In case of doubt concerning real travel costs, please check with a travel agency before submitting your application.

E. Declaration

This is to be signed by both the individual applicant and by the person legally authorised to represent the applicant's institution/organisation. Unsigned applications will not be considered. Please note that the signatures and stamp have to be in the original on both the application form and the copy.

"We the undersigned, certify that the information contained in this application form is correct to the best of our knowledge.

We take note that under the provisions of the Financial Regulation applicable to the general budget of the European Communities³, grants may not be awarded to applicants who are in any of the following situations:

(a) if they are bankrupt or being wound up, are having their affairs administered by the courts, have entered into an arrangement with creditors, have suspended business activities, are the subject of proceedings concerning those matters, or are in any analogous situation arising from a similar procedure provided for in national legislation or regulations;

(b) if they have been convicted of an offence concerning their professional conduct by a judgement which has the force of res judicata;

(c) if they have been guilty of grave professional misconduct proven by any means which the contracting authority can justify;

(d) if they have not fulfilled obligations relating to the payment of social security contributions or the payment of taxes in accordance with the legal provisions of the country in which they are established or with those of the country of the contracting authority or those of the country where the contract is to be performed;

(e) if they have been the subject of a judgement which has the force of res judicata for fraud, corruption, involvement in a criminal organisation or any other illegal activity detrimental to the Communities' financial interests;

(f) if following another procurement procedure or grant award procedure financed by the Community budget, they have been declared to be in serious breach of contract for failure to comply with their contractual obligations;

(g) if, in their grant application, they are subject to a conflict of interest;

(h) if, in their grant application, they are guilty of misrepresentation in supplying the information required by the contracting authority as a condition of participation in the grant award procedure or fail to supply this information.

I confirm that I am not in any of the situations described above, and am aware that the penalties set out in the Financial Regulation may be applied in the case of a false declaration.

Place:

Date:

Name of applicant in capital letters:

Signature of applicant:

³

Further details may be consulted on: http://ec.europa.eu/budget/documents/implement_control_en.htm

I confirm that neither I nor the institution for which I am acting as legal representative is in any of the situations described above, and am aware that the penalties set out in the Financial Regulation may be applied in the case of a false declaration.”

Place:

Date:

Name & position of representative of the institution/organisation in capital letters:

Signature of representative of the institution/organisation:

Stamp of the institution/organisation:

ANNEX 1 : GRANT RULES

This information complements the Guidelines for Applicants. Therefore, please also read carefully the section on Comenius in the Guidelines for Applicants.

The grant will make a contribution towards travel, subsistence costs, course fees and, if applicable, language preparation costs and visa costs. Your National Agency will decide on the actual grant amount; the decision will be determined by the budgetary resources available, which will depend on the budget of each participating country and the number of applications submitted.

The grant may be increased in the case of disadvantaged persons, i.e. persons who are disadvantaged for socio-economic reasons, and disabled persons who have special needs when travelling and staying abroad (e.g. an accompanying person). Your National Agency will assess the need for an increased amount against the information given in section D (budget summary and financial request) of the application form.

Course or seminar fees

A contribution will be made to the real costs of course or seminar fees based on a maximum of 150 EUR per day. For longer periods of training, the contribution to fees is likely to be considerably lower than this daily average.

Travel costs

Travel costs are based on real costs incurred. The grant will normally cover 100 % of all travel costs. However, the cheapest rates must be used. Travel costs include local/regional travel from the place of departure in the home country and to the destination in the host country. The National Agency will check that the cheapest rates have been used in all travel. If selected, you will have to submit receipts to your National Agency.

Air travel may be used only for journeys of more than 400 kilometres unless a sea crossing is necessary. In the case of travel by car, the eligible amount shall be based on the cheapest equivalent travel fare (e.g. air travel, bus, train etc) but shall at any rate not exceed the cost of one equivalent first class rail fare regardless of the number of people travelling in the car.

Subsistence costs

Subsistence costs will be calculated and paid on the basis of daily or weekly rates, depending on the duration of the training activity:

- For training up to and including 6 overnight stays, daily rates will be used to calculate the contribution to subsistence;
- For training lasting between 1 and 6 weeks, weekly rates will be used. These weekly rates fall over time - for example, the rate for the 2nd week is less than half the amount for the 1st week.

The maximum European rates are shown in the table below. Each National Agency will decide on the actual rate to grant in each case, depending on the budget for each participating country and the number of applications submitted.

Grantholders do not have to keep receipts for subsistence costs.

Please note that travel insurance costs are considered to be covered by the subsistence grant.

Example 1 (training in Belgium lasting 6 nights):

6 overnight stays x 150€ (daily rate in Belgium) x 75% (example of rate granted by sending Agency) = 675 €

Example 2 (training in Belgium lasting 2 weeks/14 nights):

(1 x 1st weekly rate @750€ + 1 x 2nd weekly rate @ 350€) x 75% (example of rate granted by sending Agency) = 825 €

Example 3 (training in Belgium lasting 2 weeks and 5 nights):

(1 x 1st weekly rate @750€ + 1 x 2nd weekly rate @350€ + 5 nights of 3rd weekly rate @200€) x 75% (example of rate granted by sending Agency) = 930€

Other costs, e.g. language preparation

You can apply for a contribution towards the real costs of language preparation, unless you intend to participate in a language training activity. Language preparation may include self-study or participation in language classes, for example.

MAXIMUM 2007 SUBSISTENCE GRANT RATES PER DESTINATION COUNTRY, €

	Daily rate <i>For short training activities (up to and including 6 overnight stays)</i>	Weekly rate (1 to 6 weeks) <i>For in-service training longer than 6 overnight stays</i>		
		1st week	2nd week	3rd, 4th, 5th and 6th week
Belgique/Belgie - BE	150	750	350	200
Bulgaria- BG	85	425	198	113
Ceska Republika - CZ	136	679	317	181
Danmark - DK	204	1019	476	272
Deutschland - DE	150	752	351	200
Eesti - EE	120	602	281	161
Ellas - EL	140	698	326	186
Espana -ES	152	759	354	202
France - FR	179	893	417	238
Ireland - IE	184	918	428	245
Italia - IT	168	839	391	224
Kypros - CY	138	690	322	184
Latvija - LV	114	571	266	152
Lithuania - LT	116	578	270	154
Luxembourg - LU	150	750	350	200
Magyarország - HU	135	675	315	180
Malta - MT	134	672	313	179
Nederland - NL	165	823	384	219
Oesterreich - AT	161	803	375	214
Polska - PL	122	610	285	163
Portugal - PT	137	686	320	183
Rumania- RO	96	478	223	128
Slovenija -SI	124	622	290	166
Slovensko -SK	139	697	325	186
Suomi - FI	177	883	412	235
Sverige - SE	169	843	393	225
United Kingdom - UK	216	1078	503	288
Island - IS	209	1044	487	278
Liechtenstein - LI	188	938	438	250
Norge - NO	211	1053	492	281
Turkey - TR	125	627	293	167