**7TH CALL FOR PROJECTS OF COOPERATION**

*French cooperation program for Croatian Civil Society Organisations*

***Concept note***

*Please fill the form using a computer and in English.*

*This concept note* ***must not exceed 2 pages*** *and must be sent back to the French Embassy in Croatia at* *djuro.zifra@diplomatie.gouv.fr* *and* *institutionnel@institutfrancais.hr* *in* ***PDF format only*** *before* ***July 6, 2025****.*

# BASIC INFORMATION ABOUT THE Applicant

## Name, postal address, OIB *(personal identification number)* and RNO *(number from the Registry of Non-profit Organisations)* of the organisation:

## Organisation’s main area of expertise:

## Name of the organisation’s legal representative *(president, director etc.)*:

## Name, phone and e-mail address of the project manager:

# BASIC INFORMATION About the project

## Title:

## Project summary (main objectives):

## Activities:

## Target group:

## Geographic area of the project implementation (within Croatia):

## Starting date and ending date *(the duration of the project is max 12 months)*:

## Potential partners and their role in the project (in Croatia and/or in France):

## To which priority area (s) of the call will the project be connected?

# PROJECT Budget

|  |  |
| --- | --- |
| Amount requested from the French Embassy *(it is possible to request up to 80% of the total amount of the project cost)*: | \_\_\_\_\_,\_\_ EUR |
| Co-funding (specify the name of the partner) | \_\_\_\_\_,\_\_ EUR |
| Applicant’s own funds:  | \_\_\_\_\_,\_\_ EUR |
| Total amount of the project:  | \_\_\_\_\_,\_\_ EUR |

|  |  |  |
| --- | --- | --- |
| Activities | Details | Amount (EUR) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# CommentS

*Please add in this section any comment you may find relevant to share with the embassy.*

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 (signature of the organisation’s representative) (signature of the project manager)

in *(place)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,* the *(date)\_\_\_\_.* \_\_\_\_. 2025.