



APPLICATION FORM

Call to establish

**4-YEAR FRAMEWORK PARTNERSHIP
AGREEMENTS**

To implement CEPOL training activities and
learning products in 2021-2024

Deadline: 02 July 2020

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CHECK-LIST

Please use the TAB-key on your keyboard to navigate between the input fields, or click in the upper left corner of the input field to enter text.

TYPE OF APPLICANT	
Law enforcement agency	<input type="checkbox"/>
Public training institution	<input type="checkbox"/>
Public research institute	<input type="checkbox"/>
Public university	<input type="checkbox"/>
Other relevant public body (e.g.: Ministry of Interior)	<input type="checkbox"/>

THE FOLLOWING DOCUMENTS¹ MUST BE SUBMITTED TO CEPOL IN ELECTRONIC FORMAT AT GRANTS@CEPOL.EUROPA.EU THE USE OF THE STANDARD FORMS IS COMPULSORY.	
1. The application form, duly completed, dated and signed by the person authorised to enter into legally binding commitments on behalf of the applicant	<input type="checkbox"/>
2. The Legal Entity Form, dated and signed by the applicant	<input type="checkbox"/> , Yes <input type="checkbox"/> , No
3. The Financial Identification Form, dated and signed by the applicant	<input type="checkbox"/> , Yes <input type="checkbox"/> , No
4. A copy of the resolution, law, decree or decision establishing the entity in question or, failing that, any other official document attesting the establishment of the entity	<input type="checkbox"/> , Yes <input type="checkbox"/> , No
For public universities having a working arrangement/memorandum of understanding with law enforcement agencies, training institutions and research institutes of the Member States: 5. Confirmation letter confirmation letter from the cooperating law enforcement agency, training institution, research institute of the Member State stating that the cooperation is existing and has been on-going since 3 years.	<input type="checkbox"/> , Yes <input type="checkbox"/> , No
6. Declaration of honour in relation to Exclusion criteria	<input type="checkbox"/> , Yes <input type="checkbox"/> , No

¹ The documents are to be numbered as indicated in this check-list.

7. Declaration of honour in relation to selection criteria (both on financial capacity and operational capacity)	<input type="checkbox"/> , Yes <input type="checkbox"/> , No
8. Operational responsibilities, with a particular view to statutory responsibilities on training activities for the law enforcement and judiciary bodies.	<input type="checkbox"/> , Yes <input type="checkbox"/> , No
9. Overview of training programmes for a law enforcement audience (including the judiciary body) that have been implemented (either fully or partially) by the applicant in last 2 calendar year(s).	<input type="checkbox"/> , Yes <input type="checkbox"/> , No

1. INFORMATION REGARDING THE APPLICANT**1.1 Identity of the applicant (not a private person)**

1.1.1. Full legal name (in original language):

1.1.2. Short name (where applicable):

1.1.3. Organisation name in English:

1.1.4. Registration number
(where applicable):

1.1.5. Legal status: Public body

1.1.6. VAT number:

1.2 Authorised signatory legally representing the organisation

1.2.1. Title:

1.2.2. Family name:

1.2.3. First name:

1.2.4. Position:

1.3 Address (of registered office – address for contact)

1.3.1. Street, number :

1.3.2. Post code:

1.3.3. Town / city:

1.3.4. Country: A to J ..
Country: K to Z ..

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1.4 Contact address for the Agency (address for correspondence, including invitations to submit proposals for individual actions to be carried out under the framework partnership)

- 1.4.1. Street, number :
- 1.4.2. Postal code:
- 1.4.3. Town / city:
- 1.4.4. Country: A to J ..
Country: K to Z ..
- 1.4.5. Telephone: + ()
- 1.4.6. Email:

1.5 Authorised contact person.

- 1.5.1. Title:
- 1.5.2. Family name:
- 1.5.3. First name:
- 1.5.4. Position:
- 1.5.5. Direct Telephone + ()
- 1.5.6. Email:

2. AREAS OF ACTIVITIES

All training activities and learning products in the CEPOL training portfolio as defined in the Single Programming Document.

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3. QUALITY OF THE APPLICATION (AWARD CRITERIA)

3.1 EU-level Training expertise and resources

3.1.1 On which of the following priority topics (in alphabetical order) do you expect that that your academy/ agency/ institution will be able to organise CEPOL training activities in the coming 4 years:

CBRNE materials and techniques (chemical, biological, radiological, nuclear and explosives)	<input type="checkbox"/>
Common Security and Defence Policy (CSDP) Missions	<input type="checkbox"/>
Corruption	<input type="checkbox"/>
Counterfeit goods/IPR infringements/Pharmaceutical crime	<input type="checkbox"/>
Counter-terrorism, foreign fighters, radicalisation and extremism	<input type="checkbox"/>
Criminal Finances and Money Laundering	<input type="checkbox"/>
Cyber-crime, Cyber-security, Cyber-investigation techniques, Digital Forensics	<input type="checkbox"/>
Dismantling of Illicit Laboratories	<input type="checkbox"/>
Document Fraud	<input type="checkbox"/>
Drug Crimes	<input type="checkbox"/>
Environmental crime	<input type="checkbox"/>
Excise fraud	<input type="checkbox"/>
Facilitated Illegal Immigration	<input type="checkbox"/>
Firearms smuggling	<input type="checkbox"/>
Fundamental rights and Hate crime	<input type="checkbox"/>
Judicial Investigations, including converting intelligence into viable evidence for use in courts	<input type="checkbox"/>
Language development	<input type="checkbox"/>
Law Enforcement Cooperation, Information Exchange and Interoperability	<input type="checkbox"/>
Law enforcement organisation development	<input type="checkbox"/>
Law enforcement research and science	<input type="checkbox"/>
Law enforcement technologies, Forensics and Other Specific Areas	<input type="checkbox"/>
Leadership	<input type="checkbox"/>

Learning and training: training design and delivery	<input type="checkbox"/>
Missing Trader Intra Community (MTIC) fraud	<input type="checkbox"/>
Organised property crime	<input type="checkbox"/>
Protection of vulnerable persons (smuggled migrants, THB victims, refugees)	<input type="checkbox"/>
Public order and Crime Prevention	<input type="checkbox"/>
Secure Communications	<input type="checkbox"/>
Trafficking and Illicit Use of Firearms	<input type="checkbox"/>
Trafficking in Human Beings	<input type="checkbox"/>
Trafficking of Cultural Heritage	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>

3.1.2 Please indicate how, in the next 4 years (2021-2024) you plan to organise human resources with expertise to design and implement EU-level training activities:

FUNCTION	PROFILE

3.2 Learning Environment

3.2.1 Please indicate what your academy/agency/institution, will be able to offer, in the coming 4 years (2021-2024), on the level of hosting CEPOL's training activities:

- host the entire course in own premises
- host the training but not accommodate the participants
- organise the entire training activity in a hotel

3.2.2 Please indicate what, in the coming 4 years (2021-2024) your academy/ agency/institution will be able to offer with regard to the learning environment:

- Large conference room (i.e. minimum capacity for 30 persons)
- Break-out rooms
- Computer room
- Technical equipment (microphones, projector etc.)
- Technical support staff
- Internet connection (external)
- Other training material (flip charts, pens, whiteboard etc.)
- Area for intervals (inside/outside, smoking area)

3.3 Capacity

3.3.1 Please indicate for which number of CEPOL training activities per year would you have the capacity in the coming 4 years (2021-2024):

4. Other comments (optional)

The applicant may add in this section information that the applicant considers as important to bring to the attention of CEPOL (e.g. clarifications in relation to the documents submitted). This is meant to be a succinct explanatory text.

5. DECLARATION OF THE APPLICANT ORGANISATION

The information provided in this application as well as all annexes is true and verifiable.

Authorised signatory of the applicant organisation:

Title:	
First name and family name:	
Position in the applicant organisation:	
Date:	
Signature: 	