**EEA/Norway Cooperation Projects in Higher Education**

**Preparatory Visit**

**REPORT**

|  |  |
| --- | --- |
| **Organisation** |  |
| **Address** |  |
| **Name(s) of participant(s)** |  |
| **Phone** |  |
| **E-mail** |  |
| **Visited organisation** |  |
| **Country, city** |  |
| **Dates of the visit** |  |

**Description of the visit.**

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| --- |
|  |

**Did you find a partner for a future project in EEA/Norway Cooperation Projects in Higher Education?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Yes |  |  | No |  |

**Please elaborate:**

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**INVOICE**

|  |  |
| --- | --- |
| **Name of the organisation** |  |
| **Organisation reg number** |  |
| **Address** |  |
| **IBAN** |  |
| **SWIFT code** |  |
| **Reference number (if applicable)** |  |
| **List of payments (*including invoice numbers and invoice date*)** | *explanation of the costname of the invoice issuerinvoice number**invoice date* | EUR |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | **TOTAL (*EUR*)** | EUR |

Name of the legal representative: /*digitally signed/*

The application must be digitally signed by the legal representative of the organisation and sent via email eeagrants@harno.ee.