# Project contact form

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| **Date:** |
| **Name of the school or organization:**  **Precised addressed:**  **Phone number:**  **OID (ex-code PIC) :**  **Name of the legal representative:**  **Name of the contact person:**  **Phone number:**  **Email address:**  ***I agree to the storage and archiving of the transmitted data in accordance with the regulations in force.*** |

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| **Synthetic description of the project** |
| **Context and issues:**  **Identified needs:**  **Activities planned:**  **Outcomes and expectations:** |

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| **Type of project** |
| **Programme, key action, fundings, etc.:** |

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| **Others** |
| **Duration:**  **European partner countries:**  **Any information you deem useful to communicate to us (means, partnerships…):** |

Form to send to [liliane.garreau@ac-dijon.fr](mailto:liliane.garreau@ac-dijon.fr)