|  |  |
| --- | --- |
| **APPLYING INSTITUTION** |  |
| **PARTNER INSTITUTION(S)**  (please provide all CA Member Institutions   and involved contact persons) |  |
| **MAIN CONTACT PERSON** |  |
| **EMAIL** |  |
| **TELEPHONE** |  |
| **TITLE OF THE INITIATIVE** |  |
| **CATEGORY**  (conference, workshop, publication, other) |  |
| **DATE/TIMEFRAME** |  |
| **AMOUNT BEING APPLIED FOR**  (estimated; max. € 2,000) | € |

|  |
| --- |
| **DESCRIPTION OF THE INITIATIVE**  **WHAT SUSTAINABLE IMPACT DOES THE INITIATIVE HAVE?**  **HOW DOES IT CONTRIBUTE TO THE CA’S STRATEGY AND GOALS?**  (max. 250 words) |
|  |

|  |
| --- |
| **HOW DOES THE INITIATIVE FOSTER COOPERATION BETWEEN CA MEMBERS?   HOW ARE THEY INVOLVED AND WHAT ARE THEIR ROLES?**  (max. 200 words) |
|  |

|  |
| --- |
| **WHAT IS THE FUND NEEDED FOR?**  (max. 100 words) |
|  |

With the application for the CA Cooperation Fund I accept the terms and conditions as stated on the website of COPERNICUS Alliance. I confirm that all partners are informed and agree to this application.

**Place, Date, Signature:**       ,      , \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_