**Norwegian Financial Mechanism 2014-2021**

**“Business Development and Innovation Croatia”**

**Programme**

**APPLICATION FORM**

 **FOR THE OPEN CALL FOR PROPOSALS**

**“Small Grants Scheme-2 on**

**Soft Measures - Development of business skills for enterprises**

**in the focus areas Green Industry Innovation and Blue Growth”**

Zagreb

March 2023

***Before filling in the application form, please carefully read the essential readings for the Call, published in the programme*** [***website***](https://www.innovasjonnorge.no/en/start-page/eea-norway-grants/Programmes/business-development/Croatia/)

# BASIC INFORMATION OF THE APPLICANT

**Full legal name of the applicant** (in English, and in the official language of the applicant):

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**Legal Status** (Please indicate the applicable legal form of the applicant entity):

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| For-profit entity (, Limited Company (Ltd), etc.) |  |
| Non-economic operator (please indicate the appropriate legal form, i.e. Civil non-profit company, Association, Foundation, etc.) |  |

**Date of establishment** (DD/MM/YYYY)**:**

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**VAT registration number:**

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**Address:**

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| --- | --- |
| Number, street |  |
| Town / City |  |
| County |  |
| Postal Code |  |

**General Contact details:**

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| --- | --- |
| Phone |  |
| E-mail address |  |
|  Website |  |

**Legal representative of the Applicant:**

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| --- | --- |
| Last name  |  |
| First name |  |
| Role within the organization |  |
| Phone  |  |
| E-mail address |  |

**Appointed contact person of the Applicant** (if different from the legal representative)**:**

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| --- | --- |
| Last name  |  |
| First name |  |
| Role within the organization |  |
| Phone |  |
| E-mail address |  |

**Number of employees**

*Please indicate the total number of employees currently employed by the applicant entity, also disaggregated by gender (number of male and female employees)*

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**Activity of the applicant:**

*Please provide a short and fact-based description of the applicant entity. The presentation of the applicant should focus on describing the brief history of the applicant, where it is located (mention the relevant NUTS city code), its main activities and the market(s) where the applicant is currently present.*

*The information provided here should concern the applicant in general, and not yet the specific project in question.*

*Only for for-profit entities, please comment on whether the company is considered to be Small, Medium or Large (based on EU recommendation and definition). Please list the exact values for the criteria used for the assessment (number of employees, total annual turnover, total assets), as well as the applicable year of reference.*

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**Board of Directors**

*If/When applicable, please present the entity’s Board of Directors and briefly mention their involvement/contribution in the operation of the applicant entity.*

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**Ownership of the applicant entity:**

*Please provide an accurate, up-to-date, and exhaustive account of the owners (shareholders) of the applicant. Please include actual percentages that reflect the current ownership status of the applicant. All shareholders must be mentioned, with their name and percentage. An exception to this rule can be applied in cases where there are several owners with a very small share (esp. relevant for public/listed companies). In such cases, the minority shareholders can be aggregated and presented in a consolidated way.*

*In case of for-profit entities, please also comment on whether there are linked or partner companies (companies with 25% share in the applicant company, or owners who own more than 25% of both the applicant company and other companies) or whether the company is part of a larger Group (e.g. through a Holding company, through ownership of the applicant company in other companies, or similar).*

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# BASIC INFORMATION OF THE PARTNER(S) INVOLVED IN THE PROJECT

**Full legal name of the partner** (in English, and in the official language of the partner)**:**

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**Legal Status** (Please indicate the applicable legal form of the partner entity)**:**

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| For-profit entity (please indicate the applicable legal form) |  |
| Non-economic operator (please indicate the appropriate legal form) |  |

**Country of establishment:**

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**Date of establishment** (DD/MM/YYYY)**:**

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**VAT registration number, Organisation number, or similar identification number:**

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**Address:**

|  |  |
| --- | --- |
| Number, street |  |
| Town / City |  |
| County |  |
| Postal Code |  |
| Country |  |

**General Contact details:**

|  |  |
| --- | --- |
| Phone  |  |
| E-mail address |  |
|  Website |  |

**Legal representative of the Partner:**

|  |  |
| --- | --- |
| Last name  |  |
| First name |  |
| Role within the organization |  |
| Phone  |  |
| E-mail address |  |

**Appointed contact person of the Partner** (if different from the legal representative)**:**

|  |  |
| --- | --- |
| Last name  |  |
| First name |  |
| Role within the organization |  |
| Phone |  |
| E-mail address |  |

**Number of employees**

*Please indicate the total number of employees currently employed by the applicant entity, also disaggregated by gender (number of male and female employees)*

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**Activity of the partner:**

*Please include information related to:*

* *The general activities of the partner (what is the partner involved in and where)*
* *Previous cooperation between the Applicant and the Partner, if applicable*
* *The role of the Partner and contribution of the Partner to the project results and activities included in the present project application*

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*Please duplicate (copy/paste) the above section if needed, in case your application involves more than one partner.*

# PROJECT INFORMATION

**Project title:**

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**Total requested grant amount (per the Detailed Budget):**

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1. **Project description**

*Please include a short and fact-based description of the project, mentioning the following relevant information:*

***Background and justification of the project / project idea***

* *Idea/ambition for the project*
* *Justification for the project and how it will be implemented*
* *Which needs or which problems/challenges will the project address?*

***Project objectives***

* *What will be the results of the project, and what does the applicant expect to gain from the project?*
* *How will the project results be used to increase the capacity for business skills development for Croatian enterprises?*
* *How will the project results contribute to the enhanced collaboration between Croatian entities and entities from the Donor State (if applicable)?*

***Key project activities***

*Which activities/work packages are included in the project and how will the activities be implemented?*

*Please distinguish between activities implemented by the Applicant, activities implemented by the partner(s) when applicable, and activities/expenses which will be outsourced to 3rd parties.*

*Activities listed must be aligned with the activities and budget lines included in the Detailed Activity-Based Budget (DABB).*

***Project Outputs / Outcomes***

*Please describe the project outputs and outcomes and how those will be achieved and measured, in line with the mandatory attachment “01 Expected Outcomes and Outputs”.*

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| **Background and justification of the project / project idea** **Project objectives****Key project activities****Location of the activity/event****Project Outputs / Outcomes** |

1. **Focus Area**

**Please select the appropriate Focus Area, relevant for your project,** *by marking with an X:*

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| --- | --- |
| Blue Growth |  |
| Green Industry Innovation |  |

1. **Project start and end date**

**Please indicate the expected project start and end date. Kindly note that the last date of eligibility of project expenses is the 30.04.2024**

Project start date: DD/MM/YYYY

Project end date: DD/MM/YYYY

1. **Project risk factors**

*Please include a description of the main risk factors of the project. Describe the risks and assess their likelihood and impact (low/med/high). Please also describe the corresponding mitigation measure(s) for each risk identified.*

*Project risks should also account for the partner(s) involvement and activities/contribution in the project, when applicable.*

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1. **Project financing plan**

*Please provide information related to the financing of the project.*

*The applicant will need to cover the co-financing needed to successfully implement the project, as the grant awarded will only cover part of the expenses according to the applicable grant rates as listed in the Call for Proposals. Please list the source(s) of the co-financing of the project expenses (e.g. future revenues/ profits, reserves, debt, owner’s own financial resources, etc.). Sufficient cash flows should also be secured, as the grant will be disbursed to cover expenses already incurred and paid.*

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1. **Identification of external consultants**

*The applicant is under the obligation to inform the Fund Operator about the involvement of any consultants in the process of preparing/submitting the application.*

*Please disclose the identity of the consultant(s), if applicable.*

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# CROSS CUTTING ISSUES

Under “**Good governance**”, please include a short description for the following:

* What are your policies on good governance?
* Are those internally developed policies or based on national or international guidelines, e.g. OECD?
* Please refer to relevant application of standards (e.g. ISO) in your company
* If relevant – please comment on how you have responded to governance issues in the past.

Under “**Sustainable development**”, please include a short description of:

* Your policy on sustainable development (economic, environmental and social sustainability)
* Actions taken to increase sustainability
* Expected impact of the project on sustainability

Under “**Gender equality**”, please include a short description of:

* Status (number and %) of men vs women employed, also in management/board
* Company policy on gender equality
* Will the project contribute to increased gender equality, and how?

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| **Good governance****Sustainable development****Gender equality** |

# BUDGET

Please fill in the “Detailed Activity Based Budget” template provided in the Programme website.

# LIST OF MANDATORY ATTACHMENTS

Please refer to ANNEX I of the relevant Call for proposals.

# ESSENTIAL READING

Please refer to ANNEX II of the relevant Call for proposals.

# SUBMISSION OF THE APPLICATION

Please refer to Article 5 of the relevant Call for proposals.

To be eligible, applications must be submitted to the Fund Operator for the “Business Development and Innovation Croatia” Programme, Innovation Norway, via email to:

* cro.Innovation@innovationnorway.no

**Important: Use subject title**: “HR-INNO – SGS-2 Soft Measures – *Name of applicant entity*”

The present application form, along with all the required mandatory attachments must be attached to one email addressed to the email addresses above.

The Programme language is English, i.e. all applications and supporting documents, shall be submitted to Innovation Norway in English. Official certificates and certified annual accounts can be submitted in Croatian language.