



# INEPS

# NEWSLETTER

OCTOBER Volume 2 Number 10

INTERNATIONAL NETWORK OF PRODUCTIVE SCHOOLS



## ANNOUNCING 8TH ANNUAL YOUTH CONGRESS

Dear INEPS friends,

On the 30th of September we sent a letter to all INEPS members through ineps@cru.fr inviting you to express your interest for participating to the next INEPS Youth Congress in Patras. At the moment we have received answers only from Gun (Stockholm), Lutz (Berlin) and Wolfgang from IPLE.

It is obvious that with such a poor participation it is not possible for us to organise an INEPS Youth Congress. Under the pressure of time to submit the application (Action 1) Youth Programme to the National Youth Agency on the 1st of November in order to get the 70% of the expenses we asked you to have at least some feedback until the 15th of October.

We will be waiting for your answer until Friday 17th October. We enclose an application form to be filled in by you and send it to our FAX number: ++30-2610-451790.

If we don't receive anymore answers then it is not possible for us to prepare the application form for funding.

So please if you have any difficulties let us know and try to find solutions together.

We are looking forward to hearing from you all.

Best regards

The organising group: Angela, Panos, Michalis, Niki, Eleni, Chaidoula, Giannis, Stratos,

Georgia, Angeliki Patras - Greece



### APPLICATION

#### Part III. Partner organisation(s) / groups(s)

Please fill in this page for each of your partner organisation(s) / group(s). (check one)

Has also applied for this project to its National Agency :

yes  no  unknown  not applicable

#### A. Details of the partner organisation / group

Name	
Street address	
Postcode	City
Region	Country
Email	Website
Telephone	Fax

#### Person in charge of the project (contact person)

Surname (Mr/Ms)	First name
Position/function	
Email	
Telephone	Fax

#### B. Profile of the partner organisation / group (check one)

Type  organisation or association  group  
 Status  governmental / public  non-governmental  other  
 Activity level  local  regional  national  international  
 European level non-governmental organisation (with member organisations in at least 8 Programme countries)  
 Please give a short description of the organisation/group (regular activities, member of, etc.):

#### C. Preliminary agreement of the partner organisation / group

I, the undersigned, on behalf of (repeat the name of the partner organisation / group)

confirm our willingness to participate in the preparation, implementation and evaluation of the youth exchange project (repeat the title of the project as stated in Part I)

as well as our commitment to ensure visibility of the European Union support for the activities and/or the production of materials and to encourage the participants to initiate new youth activities.

Name in capital letters :

Place, date : Signature :