



APPLICATION FORM

“PEOPLE - to - PEOPLE Cross-border activities” under the IPA III Cross-Border Cooperation Programme North Macedonia - Albania

All fields in the application form are compulsory

< Please supply the information required in the questions below, not exceeding 8 pages. >

*Please fill in the application form, ensuring that **all fields** are completed. Please submit the application in electronic format **both as PDF and editable MS Word** files by (insert hour) on (Insert date and month, 2026 to: **jts.mk_al2009@yahoo.com**. Applications incomplete or sent after the deadline will be rejected. Please do not provide further supporting documents and capture all relevant information in this form.*

1. Information about the project Contestant/Applicant

Which country are you applying from (<u>underline</u> one)?	
1) Republic of North Macedonia	
2) Republic of Albania	
Name of the applicant	
Legal form	





North Macedonia – Albania

Office address (street, city, country)	
Website address (if any)	
Type of Applicant (<u>underline one</u>)	
Legal entity	<ul style="list-style-type: none"> ○ Local government units, ○ Regional government units, ○ Agencies for local and/or regional development ○ Formal and non-formal education and training institutions (e.g. primary /secondary schools, VET schools, Universities, etc.) ○ Civil society organisations, as well as professional associations, farmers associations, chambers of commerce, business associations, chambers of crafts and trades and association of SME ○ (non-exhaustive list):
other (please specify)	
Name of contact person	
Position	
E-mail	
Phone	
Other (please specify)	

2. Prior experience

Please provide a brief overview of your previous experience. Include specific examples of the most relevant “people-to-people” activities you have undertaken in similar projects. For example, provide a short description of the activity, highlighting key outcomes and overall impact. Relevant experience (e.g) may include implementation of “people-to-people” cross-border cooperation programmes, IPA-funded projects, or other donor-funded initiatives.





3. Description of the “People to people cross border cooperation activities”

Please provide a detailed description of the “People to people cross border cooperation activities”:

4. Themes of the “people-to-people” cross border activities

Please specify which 'people-to-people' CBC activities you are focusing on to foster improved relations with neighboring communities."

5. Place of the contest (“People-to-people cross border activities”) implementation

Please detail the locations where the activities would be implemented and the benefits received – region/s, district/s, municipalities, towns, etc. Please quantify the number of the final beneficiaries





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6. Application/Project objectives

Please provide the overall goal/s, which the <i>“People-to- people cross border activities”</i> aims to contribute to and the specific objective(s) that it would achieve

7. Activities

Please describe in brief the main activities which are to be undertaken to achieve the results and the specific objective (s) of the project. (Please refer to point 3. Objectives / Eligibility theme, page 5 in the Guidelines):

8. Impact

Please provide a description on how the <i>“People-to-people cross border activities”</i> will Improve the knowledge about the impact of those CBC programmes on the life of citizens in the target areas.





9. Originality and replicability

Please describe how innovative, original and first-of-a-kind is the idea in the application domain. (The description should be clear, logically presented and well-illustrated):

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10. Area of Expertise

Please present familiarity with the type of papers design linked with the target areas of this CBC programme; existing contacts and projects with relevant local stakeholders; innovative initiatives, etc

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12. Other

Would you like to add any other information relevant to this call and application? If yes, please indicate exactly what.

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**Cross-Border
Cooperation**



**Funded by
the European Union**

North Macedonia – Albania

By submitting this application form, I confirm that the information provided above correctly represents the scope of activities, as per the guidelines of this call.

Date, place

Name of the person submitting the application.....

Position

Contestant submitting the application.....



PROGRAMME IS IMPLEMENTED BY: THE
EUROPEAN UNION



Republic of North Macedonia

Ministry of Local Self Government

