

Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

THIS FORM IS ONLY FOR TESTING AND ONLY FOR INTERNAL EUROPEAN COMMISSION / NATIONAL AGENCIES USE. PLEASE DO NOT DISTRIBUTE!

ENVIRONMENT: TEST

A. GENERAL INFORMATION

Please send this report duly completed and signed to your National Agency at the latest by the date stated in the grant agreement. Refer to the website of your National Agency for a link to the detailed self-calculating (excel) financial tables. Once this report and the supporting documents are submitted and approved, the National Agency will pay the second prefinancing payment.

31 ,	
B. SUBMISSION	
Programme	LIFELONG LEARNING PROGRAMME
Sub-programme	LEONARDO DA VINCI
Action type	TRANSFER OF INNOVATION
Action	LEONARDO DA VINCI Transfer of innovation
Call	2010
Project duration (months)	24 months
Report Type	INTERIM (Interim
B.1. PERIOD COVERED BY THE RE	PORT
From (dd-mm-yyyy)	
To (dd-mm-yyyy)	
B.2. PROJECT IDENTIFIERS	
Grant agreement no.	2010-1-GR1-LEO05-00006
Grant agreement period start (dd-mm-yyyy)	
Grant agreement period end (dd-mm-yyy)	
Project title	Project Title
National Id	National ID
Beneficiary name	Beneficiary Organisation, BE - BELGIUM
Beneficiary legal representative	Legal Representative
Submission id	
Form hash code	

4ABDCB1FB5C58BAB





Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

B.3. NATIONAL AGENCY

Identification GR1 LLP (IKY)

Postal address Makri 1 & Dionysiou Areopagitou, 11742, Athens Greece

Helpdesk llpeforms@iky.gr

Website www.iky.gr





Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

C. IDENTIFICATION OF THE BENEFICIARY

C.1. BENEFICIARY ORGANISATION	
Partner number	P0
Role	Applicant co-ordinator (CO-APP)
Full legal name (national language)	Beneficiary Organisation
Full legal name (latin characters)	Beneficiary Organisation
Acronym	Beneficiary Organisation
National id (if requested by the NA)	
Type of organisation	Associations working in the field of lifelong learning, including students', trainees
Commercial orientation	For profit (P)
Scope	local (L)
Legal status	private (PR)
Economic sector	A - AGRICULTURE, FORESTRY AND FISHING
Size (staff)	staff 21 to 50
Legal address	Legal Address
Postal code	Postal Code
City	City
Country	BE - BELGIUM
Region	BE10 - Région de Bruxelles-Capitale / Brussels Hoofdstedelijk Gewest
Telephone 1	000 111 222
Telephone 2	000 111 222
Fax	000 111 222

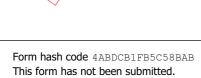
email@email.com

Website

ΕN

Email

Website





Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

C.1.1. CONTACT PERSON Title Title First name Contact Family name Person Department Department Position Position Work address Address Postal code Postal Code City City BE - BELGIUM Country Telephone 1 000 111 222 Telephone 2 000 111 222 Mobile 000 111 222 000 111 222 Fax **Email** email@email.com



Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

C.1.2. PERSON AUTHORISED TO SIGN FOR THE ORGANISATION Title Title First name Legal Representative Family name Organisation Department Department Position Position Work address Address Postal code Postal Code City City BE - BELGIUM Country 000 111 222 Telephone 1 Telephone 2 000 111 222 000 111 222 Mobile Fax 000 111 222 email@email.com **Email**



Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

D. IDENTIFICATION OF THE PARTNERS **D.1. PARTNER ORGANISATION** P1 Partner number Role Partner 1 Full legal name (national language) Full legal name (latin characters) Partner 1 Partner 1 Acronym National id (if requested by the NA) Type of organisation Vocational training institute tertiary level (EDU-HEIVoc) Commercial orientation Not for Profit (NP) regional (R) Scope public (PB) Legal status A2 - Forestry and logging Economic sector staff 501 to 2.000 Size (staff) Legal Address Legal address 1000 Postal code City Wien AT - AUSTRIA Country Region AT11 - Burgenland (A) 000 111 222 Telephone 1 000 111 222 Telephone 2 000 111 222 Fax email@email.com **Email**



Website



Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

D.1.1. CONTACT PERSON Mr Title First name Contact Family name Person Department Position Work address Address Postal code 1030 City Bruxelles AT - AUSTRIA Country Telephone 1 000 111 222 Telephone 2 000 111 222 Mobile 000 111 222 000 111 222 Fax **Email** email@email.com



Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

D.2. PARTNER ORGANISATION	
Partner number	P2
Role	Associated partner (PA-ASC)
Full legal name (national language)	Partner 2
Full legal name (latin characters)	Partner 2
Acronym	Partner 2
National id (if requested by the NA)	
Type of organisation	Vocational training centre or organisation (EDU-VET)
Commercial orientation	Not for Profit (NP)
Scope	regional (R)
Legal status	private (PR)
Economic sector	B - MINING AND QUARRYING
Size (staff)	staff 21 to 50
Legal address	Legal Address
Postal code	1000
City	Basel
Country	CH - SWITZERLAND
Region	CH01 - Région lémanique
Telephone 1	+32 22 123222
Telephone 2	
Fax	
Email	email@email.com
Website	





Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

D.2.1. CONTACT PERSON Title Prezes First name Contact Family name Person Department Position Position Position Work address Address 1000 Postal code City Basel CH - SWITZERLAND Country Telephone 1 000 111 222 Telephone 2 000 111 222 Mobile 000 111 222 000 111 222 Fax **Email** email@email.com



Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

E. CONSORTIUM

Are there any changes to the initial consortium or in the distribution of tasks and Budget amongst partners?

Note: changes to the consortium or substantial changes in the allocation of tasks require an amendment of the grant agreement.

Yes

If you answered YES, please fill in the following table:

E.1. CONSORTIUM CHANGES

No.	1
Name of partner organisations which have withdrawn (including co-ordinator)	
Replacement partners	
Has the amendment request been approved by the NA?	
Reasons for withdrawal	

E.2. CONSORTIUM MEETINGS

Send the minutes of the consortium meetings with the duly signed paper version of this report and do not forget to list them in section Annexes to the Report.

	^
No.	1
Title	
Place (country)	
Place (city)	7
Date (dd-mm-yyyy)	
Partners not attending (explain the reasons)	





Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

F. WORK PROGRAMME

current progress.	your project, in order to provide a correct assessment on
F.1. PAST ACTIVITIES	
Please describe the past activities undertaken.	
Indicate which work packages had to be changed compared with the reasons.	n the original planning in your application and briefly explain
What is the estimated percentage(%) of work completed?	
F.2. FUTURE ACTIVITIES	
Please describe the future activities.	
Indicate changes to planned activities which you expect in the that certain changes might require an amendment request and s Agency).	future and briefly explain the reasons (please bear in mind subsequent approval. In case of doubt contact your Nationa





Report Form
Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

F.3. RESULTS AND WORK PACKAGES

Please describe in this section the results achieved so far and the progress made on the corresponding working packages.

Note: In case of tangible results/products send with the duly signed paper version of this Interim Report two copies of each tangible result/product showing its current stage of development. Also do not forget to list these tangible results/products in section Annexes to the Report.

Where possible, electronic copies should be provided rather than hard copies (CDROM, links to websites). When applicable include also login and password details.

F.3.1. RESULTS No. Result/Product title Product 1 Result/Product description How does the Result/Product contribute to achieve the project objective/s Deviations from initial proposal or subsequent amendments, including reasons for change Result/Product Type Target group(s) / potential beneficiaries Target sector Result/Product language/s Medium used Availability date (dd-mm-yyyy) Number of copies (if applicable) Evaluation type and testing (if applicable) Where, when and how the evaluation and testing were carried out (e.g. scope, method, tools, sample, etc.)? Findings, conclusions and Jesson's of evaluation and testing Was the result/product/process modified respectively adapted after evaluation and testing? Involved partners





Call: 2010

Leonardo da Vinci Transfer of Innovation

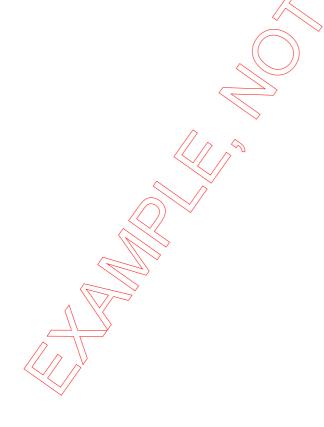
Form version: 2.2 / Adobe Reader version: 9.405

F.3.2. WORK PACKAGES

Please describe the progress of the working packages and related results.

Note: For completed results you do not need to fill in work package boxes, only the result boxes above:

Work package no.	1	
Work package title	Work Package 1	
Actual start date (dd-mm-yyyy)		
Planned end date (dd-mm-yyyy)		
Package leader		
Partners participating in the work package		
Work package progress description		
Methodological/pedagogical framework (i applicable)	f	
Deviations from initial proposal or subsequen amendments, including change reasons	t	
Result to which this work package has contributed		
Result No.	Result/Product title	
1 Product 1		







Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

G. DISSEMINATION AND EXPLOITATION	ON OF RESULTS
Describe clearly and briefly the progress of the	activities for the dissemination and exploitation of results.
No.	1
Activity description	
Activity start date (dd-mm-yyyy)	
Deviations from initial proposal or subsequent amendments, including change reasons	
Implementing partners' names	
Country	1
Region	
City	
Targeted sectors	
Targeted groups	
Activity number of participants	
Which institutions/organisations were targeted?	
Organisation type	
Why have these institutions been chosen, and what is their relevance towards the project objectives?	
	>
Describe the results and feedback received factivities.	from stakeholders (target group or sector) of implemented dissemination



Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

H. TARGET GROUPS

H.1. INVOLVEMENT

Please describe the involvement of target groups/end user(s), educational structures, sector representatives, VET policy and decision makers in your project.

H.2. TARGET GROUPS' STATISTICS

Indicate which target groups you have involved and quantify. Indicate to which educational field, educational level and economic sector the respective target group belongs.

No.	1
Target group	
Educational field	
Educational level	
Economic sector	
Number of people directly addressed to date	







Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

I. LESSONS LEARNED

I.1. PROBLEM HANDLING

Describe any difficulties encountered during the implementation of the project, and what solutions you found to overcome those difficulties.



Call: 2010

Leonardo da Vinci Transfer of Innovation

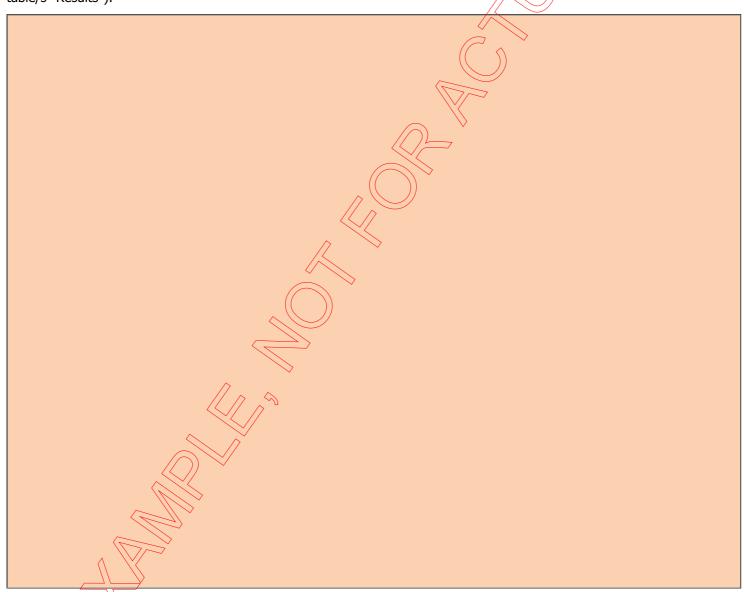
Form version: 2.2 / Adobe Reader version: 9.405

J. ANNEXES TO THE REPORT

Please enumerate here the annexes to the duly signed paper version of the report to be sent by post. Annexes should include for example:

- Minutes of consortium meetings
- Lists of participants (in consortium meetings, seminars, ...)
- Copies of tangible results/products (online, electronic versions, ...)
- Dissemination materials (publications, leaflets, posters, ...)

Also attach any related documents to the report and mark them with the right reference (e.g. Consortium Meeting No. 1, 2, 3, ... = numbering of the table/s "Consortium meetings"; e.g. tangible Result or Product No. 1, 2, 3, ... = numbering of the table/s "Results").



The following documents MUST also be submitted with the original paper version of the report to be sent by mail:

- Evidence of bank transfers between the beneficiary and ALL project partners
- Copies of sub-contracting agreements and invoices, including all tender documents.





Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

K. FINANCIAL REPORT **K.1. PARTNER** P0 Partner number Partner name **Beneficiary Organisation** Partner country BE - BELGIUM **K.1.1. EXPENSES INCURRED** Staff costs Travel and Subsistence Equipment (up to 10%) Operating costs Sub-contracting costs (up to 30%) Other 0.00 Direct costs Indirect costs (up to 7%) Total costs 0.00 **K.1.2. GRANTS** Leonardo da Vinci National funds Other funds Own contribution Other sources Total grants 0.00



Call: 2010

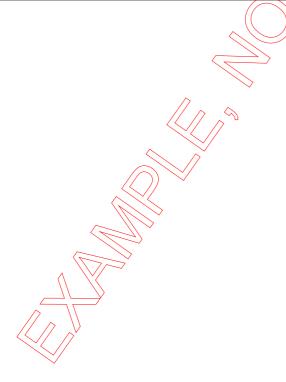
Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

K.2. PARTNER		
Partner number	P1	
Partner name	Partner 1	
Partner country	AT - AUSTRIA	

K.2.1. EXPENSES INCURRED		
Staff costs		
Operating costs	Travel and Subsistence	
	Equipment (up to 10%)	
	Sub-contracting costs (up to 30%)	
	Other	
Direct costs		0.00
Indirect costs (up to	7%)	
Total costs		0.00

K.2.2. GRANTS			
Leonardo da Vinci			
Other funds	National funds		
	Own contribution		
	Other sources	/	
Total grants	•		0.00







Call: 2010

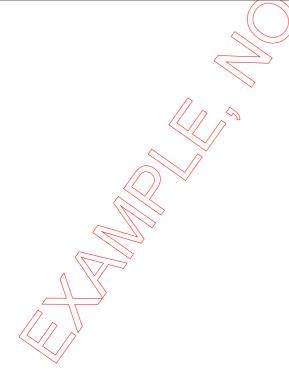
Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

K.3. PARTNER		
Partner number	P2	
Partner name	Partner 2	
Partner country	CH - SWITZERLAND	

K.3.1. EXPENSES INCURRED				
Staff costs				
Operating costs	Travel and Subsistence			
	Equipment (up to 10%)			
	Sub-contracting costs (up to 30%)			
	Other			
Direct costs		0.00		
Indirect costs (up to 7%)				
Total costs		0.00		

K.3.2. GRANTS			
Leonardo da Vinci			
Other funds	National funds	\bigcap	
	Own contribution		
	Other sources	7	
Total grants	•		0.00







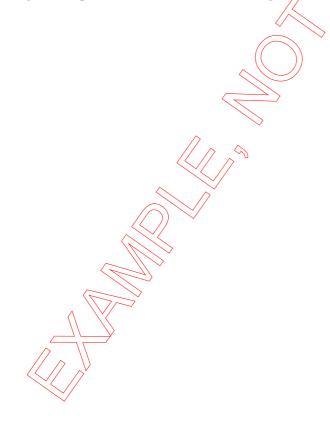
Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

K.4. PROJECT TOTALS K.4.1. EXPENSES INCURRED 0.00 Staff costs Travel and Subsistence 0.00 Equipment (up to 10%) 0.00 Operating costs Sub-contracting costs (up to 30%) 0.00 Other 0.00 0.00 Direct costs Indirect costs (up to 7%) 0.00 Total costs 0.00 **K.4.2. GRANTS** Leonardo da Vinci 0.00 National funds 0.00 Other funds Own contribution 0.00 Other sources 0.00 Total grants 0.00

The detailed self-calculating (excel) financial tables must be completed for all projects at the Interim and Final report stages. Refer to the website of your National Agency for a link to the financial tables.







Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

L. FINAL PAYMENT

Please indicate here if you request the payment of supplementary pre-financing (advances).

Yes

Yes, I request the payment.





Report Form
Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

M. DATA PROTECTION NOTICE

PROTECTION OF PERSONAL DATA

The grant application will be processed by computer. All personal data (such as names, addresses, CVs, etc.) will be processed in accordance with Regulation (EC) No 45/2001 of the European Parliament and of the Council of 18 December 2000 on the protection of individuals with regard to the processing of personal data by the Community institutions and bodies and on the free movement of such data. Information provided by the applicants necessary in order to assess their grant application will be processed solely for that purpose by the department responsible for the programme concerned. On the applicant's request, personal data may be sent to the applicant to be corrected or completed. Any question relating to these data, should be addressed to the appropriate Agency to which the form must be submitted. Beneficiaries may lodge a complaint against the processing of their personal data with the European Data Protection Supervisor at anytime.

<u> http://www.edps.europa.eu/</u>

N. DECLARATION OF CONFORMITY

I, the undersigned, hereby declare that the attached information is accurate and in accordance with the facts. In particular the financial data provided in this report correspond to the expenditure actually incurred by the project partners for carrying out project activities. This information has been approved by the authorities representing the partners involved in the activities set out in this report.

Furthermore, I declare that based on the information provided in this report I have entered respectively update, data on this project in the ADAM Project and Product Portal for Leonardo da Vinci.

and project in the ribrary roject and reduce rortary	or Essilates de Villy
Place:	Date:
Name of the beneficiary legal representative:	
Position within the beneficiary organisation:	
Original signature of the person legally authorised:	

Please send signed copy + supporting documents. It is this authentic version that will be evaluated.







Call: 2010

Leonardo da Vinci Transfer of Innovation

Form version: 2.2 / Adobe Reader version: 9.405

O. SUBMISSION

Before submitting the form electronically, please validate it. Please note that only the final version of your form should be submitted electronically.

0.1. DATA VALIDATION

Validation of compulsory fields and rules

0.2. SUBMISSION SUMMARY

This table provides additional information (log) of all form submission attempts, particularly useful for the National Agencies in case of multiple form submissions.

Number	Time	Event	Form hash code	Status
1	2011-11-18 13:25:34 *	Form has not been submitted yet	4ABDCB1FB5C58BAB	Unknown

^{*} means local PC time, which is not trusted and cannot be used for claiming that the form has been submitted in time

0.3. STANDARD SUBMISSION PROCEDURE

Online submission (requires internet connection)

0.4. ALTERNATIVE SUBMISSION PROCEDURE

Creates a file to be sent by email to the National Agency

(To be used ONLY if online submission is not available. Please see instructions about this procedure in the "Applicant Guide")

