**Interreg Experience – Kent Perception Research**

**RESPONSE SUBMISSION FORM**

Please familiarise yourself with the information contained in the brief before submitting your response.

|  |  |
| --- | --- |
| **Name of Provider** |  |

Please return this form and any supporting documents by e-mail to [raluca.brebeanu@visitkent.co.uk](mailto:raluca.brebeanu@visitkent.co.uk)

**The deadline for submissions is 17:30, Monday 5th July 2021.** Responses received after the deadline may not be considered. Please contact Visit Kent if you do not receive confirmation of receipt within 2 working days.

Please use the box below to list any supporting documents attached to or embedded within your response:

|  |  |
| --- | --- |
| **Document Name** | **No. of Pages in Document** |
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**SECTION A**

**Q1 ORGANISATIONAL DETAILS**

|  |  |  |
| --- | --- | --- |
| 1.1 | Name of the Organisation submitting the bid |  |
| 1.2 | Contact name: |  |
| 1.3 | Address: |  |
| 1.4 | Telephone number: |  |
| 1.5 | E‑mail address: |  |
| 1.6 | Date of registration or incorporation: |  |
| 1.7 | Company Registration number (if  applicable): |  |
| 1.8 | Registered charity number (if applicable) |  |

**Submission checklist**

|  |  |
| --- | --- |
| Completed questionnaire |  |
| Finance information submitted (last 2 years submitted accounts) |  |
| Complete response (refer to the brief for a full list of response requirements) |  |
| Capacity to manage the project |  |
| Cost breakdown |  |
| Completed submission form |  |

I certify that the information supplied is accurate to the best of my knowledge.

|  |  |
| --- | --- |
| **Printed Name\*:** |  |
| **Name of Organisation /Lead Partner** |  |
| **Job title or position in organisation:** |  |
| **Date:** |  |

\* Please type the name of the appropriate signatory and email this form along with your response to [raluca.brebeanu@visitkent.co.uk](mailto:raluca.brebeanu@visitkent.co.uk). A handwritten signature is not required.