**Interreg Experience – Peer Networking**

**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 hollie.coffey@visitkent.co.uk

**The deadline for submissions is 18.30, 8th January 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** |
|  |  |
|  |  |
|  |  |
|  |  |

**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: |  |
| 1.7 | Date of registration or incorporation: |  |
| 1.8 | Company Registration number (if applicable): |  |
| 1.9 | Registered charity number (if applicable) |  |

**Submission checklist**

|  |  |
| --- | --- |
| Completed questionnaire |  |
| Finance information submitted  |  |
| Complete response (refer to the brief for a full list of response requirements) |  |
| Outline of specific expertise and the business coaching process you are proposing to use |  |
| 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 hollie.coffey@visitkent.co.uk. A handwritten signature is not required.