

## Annex I Tender submission form

# EPF Capacity Building Programme Slovakia

*Please fill in the form in English and leave the irrelevant parts blank.*

### GENERAL INFORMATION

The tender is submitted by:

<b>Name of the tenderer<sup>1</sup></b>	
<b>Address</b>	
<b>City</b>	
<b>Postcode</b>	
<b>Country</b>	
<b>Website</b>	
<b>E-mail</b>	

The contact person for this tender is:

<b>Name</b>	
<b>Position/function</b>	
<b>Office address</b>	
<b>Telephone</b>	

<sup>1</sup> Please indicate the official name of the company/organisation/institution etc.

Only if the tenderer is a natural person indicate his/her name: in this case the information for 'contact person' and for the 'person authorised to represent the tenderer and to sign the contract' must be left blank.

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Email: [info@eu-patient.eu](mailto:info@eu-patient.eu) Web: [www.eu-patient.eu](http://www.eu-patient.eu)

<b>Fax</b>	
<b>E-mail</b>	

The person authorised to represent the tenderer and to sign the contract is:

<b>Name</b>	
<b>Position/function</b>	
<b>Office address</b>	
<b>Telephone</b>	
<b>Fax</b>	
<b>E-mail</b>	

## EXPERIENCE AND EXPERTISE

**Please briefly describe your experience in the area of evaluation.**

(Please refer to section 4 of the Call for Tenders)

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**Please briefly describe your experience with fundraising in the non-profit sector, highlighting your specific experience and accomplishments with fundraising for patient organisations.**

**Please briefly describe your expertise in the areas of coaching organisations, organizational planning and implementing training.**

## **DESCRIPTION OF OFFER**

### **2.1 Technical part**

Please use this part to describe how you intend to develop and deliver this training module (please refer to section 3 of the tender).



**2.2 Financial part**



