



Partner Search Form

Please do not write more than two pages.

Identification of the applicant	
Name of the organisation	EuroConnect
Registered address (street, city, country)	Anapafseos 6, Metamorfofi, 14451, Attiki, Greece
Telephone / Fax	+30 210 8540914
Website of the organisation	Www.euroconnect.eu
Name of the contact person	Charalampos Manousiadis
Email/Telephone of the contact person	+30 6974289950, cm@euroconnect.eu
Short overview of your organisation (key activities, experience)	<p>We represent several Greek Municipalities and we help them get ready and participate to EU programs. Some of our clients are highly interested in participate in the calls of Europe for Citizens with deadline 2/9/2019.</p> <p>It would be a pleasure to find a Greek Municipality that fits in your proposal and accommodate its participation in your consortium.</p>
Description of the project	
Strand, Measure in the framework of "Europe for Citizens" Programme (e.g. European Remembrance; Civil Society Project; Town Twinning)?	European Remembrance; Civil Society Project; Town Twinning calls ending 2/9/2019
Timetable of the project	
Short description of the project, including its aims	Seeking for a consurtium that seeks Greek Municipalities , so we can make the contact.

Role of the partner organisation in the project	Partnert, Member of the consurtium
Comments from the applicant	