

Application Form for Consultancy Service Providers

*(Version 1.0)*

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| Registered Name of Consultancy Service Provider | (BLOCK LETTERS) | | | | | |
| Registration / Identification Number |  | | | | | |
| VAT Number |  | | | | | |
| Official Address |  | | | | | |
| e-mail address |  | | | | | |
| URL: website |  | | | | | |
|  | | | | | | |
| Profile of Consultancy Service Provider |  | | | | | |
|  | | | | | | |
| Consultant |  | Name & Surname | | (BLOCK LETTERS) | | |
| ID No. | |  | | |
| Designation | | (BLOCK LETTERS) | | |
| Highest relevant and recognised educational qualification | | Title (eg. MBA) | (BLOCK LETTERS) | |
| Year of award |  | |
| Awarding Body | (BLOCK LETTERS) | |
| MQF level |  | |
| Copy of relevant academic qualification is attached | |  | | |
| Competence and Expertise |  |  | | | | |
|  | | | | | | |
| Consultant |  | Name & Surname | | (BLOCK LETTERS) | | |
| ID No. | |  | | |
|  | Designation | | (BLOCK LETTERS) | | |
| Highest relevant and recognised educational qualification | | Title (eg. MBA) | | (BLOCK LETTERS) |
| Year of award | |  |
| Awarding Body | | (BLOCK LETTERS) |
| MQF level | |  |
| Copy of relevant academic qualification is attached | |  | | |
| Competence and Expertise |  |  | | | | |
|  | | | | | | |
| Description (brief) of the methodologies adopted by the Service Provider | | | | | | |
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|  | | | | | | |
| Declaration | (insert name of applicant Service Provider) is an economic operator having the competence and expertise in the provision of consultancy services to Micro, Small and Medium-sized enterprises operating across different sectors of the economy. | | | | | |
| Consultancy services provided shall not be of a periodical or continuous nature, or in relation to the normal operating costs of the beneficiary Undertaking, such as routine tax consultancy services, regular legal services or advertising or related to legal and regulatory obligations arising from the nature of the beneficiary’s operations and economic activity. | | | | | |
| Consultancy services shall only be provided to external Undertakings which are autonomous and unrelated to the Service Provider. | | | | | |
| By submitting this application for enrolment (insert name of applicant Service Provider) is accepting to provide consultancy services in line with the binding Guidelines for Consultancy Service Providers issued by the Intermediate Body. | | | | | |
| The applicant accepts that the Intermediate Body will conduct the necessary checks to confirm that the consultancy services provided are in line with these guidelines. | | | | | |
| Authorised Representative of Consultancy Service Provider | Name and Surname | | (BLOCK LETTERS) | | | |
| I.D. No. | |  | | | |
| E-mail address | |  | | | |
| Contact No. | |  | | | |
| Designation | | (BLOCK LETTERS) | | | |
| Signature | |  | | | |
| Date | |  | | | |
|  | | | | | | |

*Data Protection Declaration -*

*Personal Data supplied to the Measures and Support Division (MSD) within the scope of implementation of projects being co-financed by Cohesion Policy funds is processed, in accordance with Community obligations according to law and in line with the provisions of Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) and any subsequent amendments, by MSD and by other stakeholders and competent authorities mandated to implement, monitor, execute payments, controls and audit the project/contract.*