**PARTNERSHIP DECLARATION FORM**

*Each Member State participating in the transnational Specific Action must fill in this declaration and the signed scan has to be attached to the application form submitted to the European Commission.*

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| **Information about the project proposal for transnational Specific Action** |
| **Fund** | Internal Security Fund (ISF) |
| **Specific Objective** | SO2 Improving and intensifying cross-border cooperation, including joint operations, between competent authorities in relation to terrorism and serious and organised crime with a cross-border dimension |
| **Specific Action** | EMPACT  |
| **Reference of the call** | ISF/2022/SA/2.2.1 |
| **Lead Member State**  |  |
| **Participating Member State**  |  |
| **Title of the project** |  |

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| **Declaration of partnership** |
| I, the legal representative of the partner Managing Authority, [Full legal name of the Managing Authority of the partner Member State]for the purpose of the submission of the application under the transnationalSpecific Action EMPACT to the European Commission following the call for expression of interest for specific action ISF/2022/SA/2.2.1,hereby agree to fully subscribe to the proposal to be submitted to the Commission by [Full legal name of the Managing Authority of the lead Member State]and to follow the common agreement reached on with the partners to implement the project, if successful.I thereby mandate [Full legal name of the Managing Authority of the lead Member State]to submit the proposal also on my behalf. I hereby commit to implement the proposal with all the obligations and conditions set out by the partnership.  |

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| **Date** | **Signature** |
|  | Legal representative of the partner Managing Authority : |