**LETTER OF INTENT**

**Erasmus+ Blended Intensive Programmes (BIP)**

With this letter we express the intention of the **……………………………………………..**(name of Partner Institution) to participate as partner institution in the Blended Intensive Programme titled:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as the coordinating higher education institution.

In case the proposed BIP is approved and financed, we as a partner institution and within our institutional capacities declare that we shall sign the Erasmus+ Inter-institutional, Bilateral or Multilateral Agreement with other partners in this BIP and that we will open and carry out the call for applications for our students and staff, which includes the selection of the best candidates for the participation in this BIP.

**Name, surname and function of the signatory (UG)**

**Signature: Stamp and date:**

**Name, surname and function of the signatory (Partner Institution)**

**Signature: Stamp and date:**