

## TWINNING PROJECT PROPOSAL

### **I. Brief description of the government authority, that volunteered to participate in Twinning.**

1. Name of the government authority \_\_\_\_\_
2. Contact information of responsible person of the government authority \_\_\_\_\_

3. Is your institution able to provide office and proper equipment for the Resident Twinning Adviser (for the period of project implementation) and for the Short term Experts (for the period of their missions in Ukraine) \_\_\_\_\_

### **II. Description of potential Twinning project**

1. Project title \_\_\_\_\_
2. Problem the project is aimed at \_\_\_\_\_  
\_\_\_\_\_
3. The goal of the project \_\_\_\_\_
4. Objectives of the project \_\_\_\_\_  
\_\_\_\_\_
5. Expected mandatory results \_\_\_\_\_
6. Key documents between Ukraine and the EU addressed by the project \_\_\_\_\_  
\_\_\_\_\_
7. Related technical assistance projects \_\_\_\_\_

\* The total amount - no more than 3-4 pages.