contatti@reteopera.it · reteopera.it
via Vittor Pisani 10 — 20123 Milano

COOPERATION PROPOSAL

For non-European organisations wishing to join the programme

Form no. _____ Date completed ____/____/_____

Form for training providers, schools, universities, licensed employment agencies and government bodies based outside the European Union.

Fill in the form and send it to **contatti@reteopera.it**, together with any documents; you can also use the online form at **reteopera.it**, "About us" page.

A Organisation details

Name of the organisation _____

Country _____

City _____

Address _____

Licence or accreditation number _____

Issuing authority _____

Website _____

Legal representative (name, position) _____

Type of organisation

- ☐ Accredited training provider
- ☐ Public school or university
- ☐ Licensed employment agency
- ☐ Government body
- ☐ Other: _____

Licence number and authority are required for agencies and accredited organisations.

B Contact person

Name and surname _____

Role _____

E-mail _____

Phone (with international dialling code) _____

Preferred language _____

C Sectors

Sectors in which the organisation trains or recruits.

- ☐ Healthcare and personal care
- ☐ Logistics and retail distribution
- ☐ Transport
- ☐ Agriculture
- ☐ Manufacturing and production
- ☐ Construction
- ☐ Tourism, hotels and restaurants
- ☐ Skilled trades and crafts
- ☐ Unarmed security
- ☐ Other: _____

D Capacity and offer

Italian language courses at A1 level, directly or in partnership

☐ Yes ☐ No ☐ To be assessed

Indicative number of candidates per year

☐ Up to 20 ☐ 21–50 ☐ 51–100 ☐ More than 100

Facilities and staff available (classrooms, workshops, teachers)

E Cooperation proposal

Describe your proposal (activities, countries, timing, any conditions)

F Useful documents

If available, send them to contatti@reteopera.it together with the form.

☐ Recognition deed, licence or accreditation

☐ ID document of the legal representative

☐ Registration in the relevant register

☐ Presentation of the organisation (optional)

G Declaration and privacy consent

The undersigned, as legal representative or contact person of the organisation, declares that the information provided is true.

☐ I consent to the processing of my personal data under the GDPR (EU Regulation 2016/679). Privacy policy: reteopera.it/en/privacy-policy

Place and date _____ Stamp and signature _____

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H For Rete Opera Italia use only — do not fill in

Date received ___/___/_____ Operator _____

Outcome of the preliminary assessment

☐ Eligible — cooperation agreement can proceed ☐ To be looked into ☐ Not eligible

Notes

_____

_____