

Data registration form for cooperation partners in the project SEBco



Company name _____

Address _____

City, zip-code _____

Contact person _____

Position in the company _____

Telephone _____

Fax _____

E-mail _____

WWW _____

• Type of organisation:

- Manufacturing/ Industry
- Services
- Commerce
- Other (please describe:)

• Number of employees: _____

• Turnover in 2005: (Euro)

- 0 – 2 MEUR
- 2 MEUR – 10 MEUR
- 10 MEUR – 50 MEUR

• Offered products and services/ short profile of your company

• Existing/ required cooperation with regions:

Region	Rostock	Kaliningrad	Taurage	Zemgale	Warminski-Mazuren	Pomerania	West Pomeranian
Country	Germany	Russia	Lithuania	Latvia	Poland	Poland	Poland
Existing partnership(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partnership(s) required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Type of wanted business contacts

We Offer

We Request

Trade Intermediary (agent, representative, distributor)	<input type="checkbox"/>	<input type="checkbox"/>
Franchise or licence agreement	<input type="checkbox"/>	<input type="checkbox"/>
Marketing/ Promotion	<input type="checkbox"/>	<input type="checkbox"/>
Research & Development (R&D)	<input type="checkbox"/>	<input type="checkbox"/>
Development of new products/ services	<input type="checkbox"/>	<input type="checkbox"/>
Outsourcing of production, processing...	<input type="checkbox"/>	<input type="checkbox"/>
Logistic cooperation	<input type="checkbox"/>	<input type="checkbox"/>
Training, staff exchange for knowledge transfer	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>

- Please, indicate the type of business your partner should run:

- Manufacturing/ Industry
- Services
- Commerce
- Other (please describe:

- Other requirements regarding business partner:

- Please, indicate your preferred contact languages(s):

- English
- Polish
- German
- Lithuanian
- Russian
- Latvian

I hereby agree that Employers Association Rostock is authorized to collect and transfer received data to the SEBco-Net project database in order to organize matching workshops. I agree to receive via e-mail from Employers Association Rostock information about EU projects and organized trainings and seminars. I also agree that Employers Association Rostock sends mentioned above information to its SEBco partners in order to find me business copartners. I am aware of having right to check and change my data, ad also to disagree on transfer the data as mentioned above. Providing all information is voluntary.

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(date and signature)