

Euromed Héritage IV/MEDMEM/ENPI 150-924

Application form to Med-Mem project

Your are not in possession of audiovisual archives (vidéo and/or audio)

				cad	re réservé
1 MY COUNTRY					
2 WHO AM I					
a museum	yes		no		
a library	yes		no		
a university a school	yes yes		no no	H	
other	,00	_			
Name of my company / institution :					
Contact person :					
Address / mail / tel. :					
I do not possess audiovisual archives but I wish to participate in Med	d-Mem proje	ect.			
3 MY MOTIVATIONS :					
4 PUBLIC WELCOMING					
My institution is open to public	yes		no		
In what kind of area ? This area is equiped with computers ?	yes		no		
	,00	_	110		
5 TARGETED PUBLICS The public targeted by the activities of my institution / which is coming to	my nlace is :				
from school	yes		no		
from university	yes		no		
a public in general professional	yes yes		no no		
specify				. "	
other					
specify					
Comments:					
6 DIFFUSION NETWORK					
My institution is open to public, I will dedicate 1 continuous access at				_	
minimum to Med-Mem website	yes		no		
Beyond, specify the number proposed					
Specify the potential installation					
My institution is not open to public, I propose to participate to the project					
diffusion part by working on its network	yes		no		
Specify the number of potential contacts :					
Example:					
Other proposal :					
TO DECLICATE THE MEDICATE					
7 TO PROMOTE THE WEBSITE I will promote Med-Mem project and its website, in particular through					
communication tools pre existing in my institution and events	yes		no		
8 GOOD PRACTICES	•				
I subscribe to the principles enunciated in Med-Mem Charter, and in parti	cular :				
to respect the legal good practices (property rights principles),					
the necessity to safeguard the audiovisual archives		_			
	yes		no		
9 PROJECT COORDINATION					
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I will participate to the coordination meetings (3 meetings scheduled), and Diem).	ı i wiii pay 50	л» от ите expe	iises (liavei and	rei ei	
Please contact us for more information about how to participate.					

<u>Form to send to :</u> Ina Méditerranée - Projet Med-Mem

23 rue Guibal BP 60104 13300 - Marseille cedex 03 France

or

contact@medmem.eu

With:

a letter of intent signed by the direction of your institution and illustrating your potential interest to Med-Mem project