**Agreement on the Participation in Technology Development Project**

Project Title:

Name of Organization:

Participation Type: 🞎 Lead research institution 🞎Partner research institution (Please, tick on an applicable box)

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| --- | --- | --- | --- | --- |
| Participant’s Name | Date of Birth | Affiliation&Position | Rate of  Participation | Remark |
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We agree that above employee(s) takes part in the project specified above.

August.00, 2018

**The Name of Head: (Signature)**