**Expression of interest for partnership form for Women on Wheels Academy 2017**

Please complete this form if you are interested to become a partner for Women on Wheels Academy.

Before completing the form, please read carefully partnership criteria listed on [www.azadfoundation.com/women-on-wheels-academy](http://www.azadfoundation.com/women-on-wheels-academy) to ensure you are an eligible partner.

Please send the completed form to [wow.partners@azadfoundation.com](mailto:wow.partners@azadfoundation.com) to be considered.

If you have any questions, please do not hesitate to contact:

Anita Mathur

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Azad Foundation – Jaipur

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**0141-2704475**

**9413341845**

1. **Organisation name**
2. **Organisation address**
3. **Email and telephone contact details**
4. **Website / Facebook page URL**
5. **History: please include year when founded and briefly describe key milestones. You can include links to annual reports or other relevant materials.**
6. **Main areas of work and key achievements: please describe main programmes your organization undertakes and the most significant outcomes of your work**
7. **Specific work with women (please describe your objectives, approach, location and outcomes, including the number of women reached to date).**
8. **Please describe why you are interested in becoming Women on Wheels Academy partner.**
9. **How many women do you anticipate you would be able to enroll for the Academy to start the residential training on 1 April 2016?**

***NB: As an Academy partner you need to commit to facilitating private chauffeur employment for the trained women. Please consider this when deciding on the number of women to be enrolled by your organization.***

**10. How did you learn about this Call for partners?**

***Please attach any additional materials, reports or photos you would like to share to support your application.***