**British Council Nigeria 2019 UK Partnerships Inward Mission**

**Expression of Interest Form**

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| --- | --- | --- |
| Professional information | Job title |  |
| Department/unit |  |
| University or organisation |  |
| Office address |  |
| City and postcode |  |
| Country |  |
| Contact details | Email |  |
| Office telephone |  |
| Mobile |  |
| Information | What types of TNE partnerships are you looking to build with Nigerian Higher Education partners? | (300-word limit) |
| Please provide examples of current strategic partnerships in SSA. | (300-word limit) |
| Attendee  Information | Title (Mr/Ms/Dr etc.) |  |
| First name |  |
| Family name |  |
| Gender |  |

Terms and Conditions

Institutions who wish to book a place on the mission understand that receipt of their form is **conditional** until approved and confirmed in writing by the British Council.

Institutions/representatives will be responsible for booking flights, hotels and travel insurance and organising visas. (British Council will provide visa support letters)