**EXPRESSION OF INTEREST**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby express our interest to participate in the Modernizing Government Regulations Program as a beneficiary agency for the Capability Development Assistance on Regulatory Impact Analysis. We hereby present the agency profile and other pertinent information:

(Agency)

(Name)

(Position)

|  |
| --- |
| Agency Profile |
| Complete Name of Agency |   |
| Complete Address of Agency |  |
| Reasons for participating in the project |  |
| Other Information |
| Contact Person*Name* |  |
|  Title Surname First Name Middle Name Suffix |
| Contact Number*Landline* |  | Contact number*(Mobile)* |  | E-mail address |  |
| Head of Agency*Name* |  |
|  Title Surname First Name Middle Name Suffix |
| Position/ Designation |   |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature