Programmes of the European Union for Research and Innovation

Form for requesting a contribution for coordination in project proposals

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| **1 Description of the project** |
| **Abstract** (can be extracted directly from the proposal submitted to the European Commission). |

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| 2 Details Applicant | | | | | | |
| Surname |  | | | | First name |  |
| Title (if applicable) |  | | | | Position/role |  |
| Phone |  | | | | E-mail |  |
| 3 Institution or company | | | | | | |
| 3.1Name of institution/company | | |  | | | |
| 3.2Institute / Department | |  | | | | |
| 3.3Address | |  | | | | |
| 3.4Postcode | |  | | 3.5 City | |  |
| 3.6UID no. (CHE-\*\*\*.\*\*\*.\*\*\*) | |  | | 3.7Legal status | |  |

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| **4 Programme and call details** | | |
| 4.1Programme (Horizon Europe, Euratom, DEP) |  | |
| 4.2Programme part/sub-programme |  | |
| 4.3Call identifier |  | |
| 4.4 Evaluation procedure | 1 stage | 2 stages |

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| **5 Preparation of the proposal** | |
| 5.1Duration (to prepare the proposal) | months |
| 5.2Cost approx. (workload, expenses, etc.) | CHF |
| 5.3Submission date of the proposal | (TT-MM-JJJJ) |
| 5.4Proposal no. |  |

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| **6 Type of project** | | |
| 6.1 Instrument | Collaborative projects  Other: | Projects within institutionalised partnerships  ERC Synergy Grants |

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| **7 Project details** | | | |
| 7.1Project acronym and title |  | | |
| 7.2Project duration | months | | |
| 7.3Total costs | All partners  Own share  Of which cost associated with coordinating | | €        €        € |
| 7.4My institution or company participates for the first   time **as coordinator** in a project of the EU  programmes for research and innovation | Yes | No | |
| 7.5 My institution or company participates in the   **research activities** (Work Package) of this project  (consulting services are **not** considered research) | Yes | No | |

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| **8 Annexes** |
| Proposal submitted, administrative part  Evaluation Summary Report  Extract from the Commercial Register  Others: |

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| **9 Further remarks** |
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| **I hereby confirm that all information provided is complete and accurate and that my institution or company agrees with this application.** | |
| Place and date |  |
| Signature applicant |  |