Project Application Form - Part A

1. BASIC PROJECT DATA

Project Title	
Project Acronym	
Project Duration (months)	Max. 48 months
Total Budget from Program (euro)	
Own Budget (euro)	
No. of Partners in Consortium (including the project promoter)	
Thematic area	[select]
Main Key Topic (from the selected thematic area)	[select]
Key Topic 2	
Key Topic 3	
Key words	Max. 5

2. Publishable summary of the Project (Max. 4.000 characters)

3. DETAILS OF THE PROJECT PROMOTER AND PROJECT PARTNERS

Organisation Details						
CUI/VAT number/Organisation number						
Organisation name						
Principal CAEN	[only for entities from Romania]					
Research CAEN	[only for entities from Romania]					
County						
City						
Street						
Street No.						

Other address details	
Zip Code	
Entity type	[select]
Organisation type*	[select]
Organisation website	
Principal Investigator** / Re	search team leader from Partner
Last Name	
First Name	
Previous Last Name (if case)	
CNP / Personal number	
Birth Date	
Doctor	Since
Phone Number	
Fax Number	
Email Address	
Person responsible for administrative	e and financial management of the project**
Last Name	
First Name	
Previous Last Name (if case)	
CNP	
Birth Date	
Phone Number	
Fax Number	
Email Address	

^{*} According to State Aid Annex

^{**} Only for the Project Promoter

4. DID YOU USE A CONSULTANT IN PREPARING OF THE PROJECT PROPOSAL?

[select] Yes/No

If yes, please provide the last name, first name and institution of consultant.

5. KEY PERSONS LIST

No. Crt.	Participant	Last Name	First Name	CNP
1.	[select]: CO, Partner 1 – Partner n			

6. PROJECT PLAN

No. Crt.	Туре	Phase Activity Partner	Category of activity*	Phase date of submission (2019, 2020,2023)	Budget from the Programme (euro)	Own Budget (euro)	Total (euro)
	Phase	[Title, results]					
1	Activity	[Title]	[select]				
	Partner	[Partner no.]					

^{*} In accordance with State Aid Scheme

7. REQUESTED FUNDING PER PARTICIPANTS AND YEARS (EUR)

	2019		2020		202n		Total					
Participant	Budget from the Program	Own Budget	Total									
[select]												
[select]												
TOTAL												

8. BUDGET BREAKDOWN BY CATEGORY OF EXPENSES AND PARTNERS SHARE (EUR) / YEAR

Participant	Category of Expenses	Budget from the Program	Own Budget	Total
	Personnel costs (the cost of staff assigned to the project)			
	Travel and subsistence allowances for staff taking part in the project (acc. to the national rules)			
[14]	Equipment			
[select]	Consumables and supplies			
	Other costs (subcontracting specific services)**			
	Indirect costs (overheads)***			
	TOTAL			

^{**} no more than 15% of the total budget project

All of the above information will be submitted directly on the submission website www.uefiscdi-direct.ro.

^{***} Indirect eligible costs shall be determined by applying a flat rate of 25% of the total direct eligible costs, excluding direct eligible costs for subcontracting and the costs of resources made available by third parties which are not used on the premises of the beneficiary, as well as financial support to third parties.