**Expression of interest - CIBEREHD INTRAMURAL PROJECTS 2024**

***Deadline: 13th May, 2024***

**PROJECT TITLE:**

**PROJECT ACRONYM:**

**1. PROJECT COORDINATOR (PI) (Mandatory):**

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| --- |
| **PI Coordinator name and surname:** |
| Year of birth: | Assumptions for Annex I Extension \*: Yes [ ]  No [ ]   |
| CIBEREHD research group code: | E\_mail:  |
| Consortium Institution: |
| Name and surname of project collaborators (add rows as needed) | CIBEREHD research group code |
|  |  |
|  |  |
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|  |  |

\* Provide supporting documentation

**2. PROJECT Co-PI (Mandatory)**

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| --- |
| **CoPI name and surname:** |
| Year of birth: | Assumptions for Annex I Extension \*: Yes [ ]  No [ ]   |
| CIBEREHD research group code: | E\_mail:  |
| Consortium Institution: |
| Name and surname of project collaborators (add rows as needed) | CIBEREHD research group code |
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\* Provide supporting documentation

**3. PROJECT Co-PI (Mandatory)**

|  |
| --- |
| **CoPI name and surname:** |
| Year of birth: | Assumptions for Annex I Extension \*: Yes [ ]  No [ ]   |
| CIBEREHD research group code: | E\_mail:  |
| Consortium Institution: |
| Name and surname of project collaborators (add rows as needed) | CIBEREHD research group code |
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\* Provide supporting documentation

***3. OTHER CIBEREHD GROUPS*** *(Add tables as needed)*

|  |
| --- |
| **CoPI name and surname:** |
| Year of birth: | Assumptions for Annex I Extension \*: Si [ ]  No [ ]   |
| CIBER research group code: | E\_mail:  |
| Consortium Institution: |
| Name and surname of project collaborators (add rows as needed) | CIBEREHD research group code |
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***4. OTHER CIBER GROUPS***

*(Add tables s as needed) (Researcher name, CIBER research group code, CIBER thematic area)*

***5. EXTERNAL GROUPS:***

*(Researcher name, research group, institution)*

**APPLICATION DETAILS LIMITED TO 6 PAGES** (Arial/Calibri font size 11)

**A. CLINICAL CHALLENGE. SUMMARY**

*(Maximum 300 words)*

**B. OBJECTIVES**

*(Maximum 500 words)*

**C. STATE OF THE ART. JUSTIFICACION OF THE PROJECT**

*(Review of relevant literature and current knowledge in the fields covered by the project. Relevance of the scientific/clinical problem and principal questions to be addressed. How this project will contribute to go beyond the state-of-the-art and improve the health of citizens.)*

**D. SPECIFIS AIMS**

*(Describe the approach to test the hypothesis)*

**E. DETAILED WORKPLAN. Clearly set: methods and time plans**

*(Presentation of the overall structure of the work plan; timing of the different work packages and their components; Gantt chart or similar. Deliverables and milestones))*

**F. NOVELTY, ORIGINALITY AND INNOVATION OF THE PROPOSAL**

**G. COORDINATION AND ADDED VALUE OF THE CONSORTIUM**

*(Specific objectives of each group and added value. Interaction among different objectives and activities. Coordination mechanisms planned for the effective execution of the project)*

**H. ADDED VALUE OF THE CONSORTIUM**

**I. BUDGET**

*Indicate the group that makes the expense, concept and amount (add as many rows as necessary with the concepts within each element. Do not include personnel)*

*Funding is limited to €200.000. Keep the budget balanced.*

|  |  |
| --- | --- |
| ***CONCEPT/ITEM*** | ***BUDGET REQUESTED*** |
| ***1st year Group/SSGroup*** | ***2nd year*** |
| ***Consumables*** |  |  |
|  |  |  |
|  |  |  |
| ***Services*** |  |  |
|  |  |  |
|  |  |  |
| ***Small equipment*** |  |  |
|  |  |  |
|  |  |  |
| ***Travels*** |  |  |
|  |  |  |
|  |  |  |
| ***Others (detail)*** |  |  |
|  |  |  |
|  |  |  |
| ***TOTAL*** | *€* | *€* |

**J. FUTURE PLAN**

*(Continuation after the end of the project, internationalization and potential transfer plan)*

**K. INDUSTRIAL AND INTELLECTUAL PROPERTY**

*(List any patent to be used with information about the co-owners)*

**L. ETHICAL APPROVAL**

Will your project involve experiments requiring ethical approval/s?

Yes [ ]  No [ ]

*Should this application result in the granting of an award, a copy of the ethical human and/or animal approval/s and the informed consent (if apply) must be sent before the final approval of the award.*

**Signed by** (Add as many signatures as needed)

PI Coordinator PI of the CIBER research group

Co-PI of the collaboration PI of the CIBER research group

Co-PI of the collaboration PI of the CIBER research group

**APPENDIX (1 page)**

*(Describe the type and format of the data to be collected / generated within the framework of the project, the procedure foreseen for access to the data (who, how, and when can access them), data ownership, the repository where it is expected to be deposited, and the procedure foreseen to guarantee the specific ethical or legal requirements to be applied)*