**APPLICATION FORM (ANNEX 3)**

**CALL FOR GRANTS FOR THE COORDINATION OF HORIZON EUROPE PROJECTS AND FOR ERC PROPOSALS UPV/EHU 2024**

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| *This document cannot be modified or replaced once it has been submitted, except at the Research Department's request within the application rectification deadline.* |

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| **PRINCIPAL RESEARCHER** | | | |
| Surname: |  | Name: |  |
| ORCID code: |  | | |
| Department: |  | | |
| Centre/Faculty: |  | | |
| Telephone number: |  | E-mail: |  |

1. **COORDINATION OF HE PROJECTS:**

**PROJECT 1:**

|  |  |
| --- | --- |
| **PROJECT** | |
| Acronym: |  |
| Grant Agreement number: |  |
| HE Call: |  |
| Fields of Science: |  |
| Duration (months): |  |
| Number or partners: |  |
| Total Budget of the project: |  |
| Budget of the UPV/EHU: |  |
| **TOTAL:** |  |

|  |  |
| --- | --- |
| **REQUESTED BUDGET** | |
| Personnel Costs: |  |
| Consumables: |  |
| Travel and living expenses: |  |
| Other expenses: |  |
| **TOTAL:** |  |

**PROJECT 2:**

|  |  |
| --- | --- |
| **PROJECT** | |
| Acronym: |  |
| Grant Agreement number: |  |
| HE Call: |  |
| Fields of Science: |  |
| Duration (months): |  |
| Number or partners: |  |
| Total Budget of the project: |  |
| Budget of the UPV/EHU: |  |
| **TOTAL:** |  |

|  |  |
| --- | --- |
| **REQUESTED BUDGET** | |
| Personnel Costs: |  |
| Consumables: |  |
| Travel and subsistence expenses: |  |
| Miscellaneous expenses: |  |
| **TOTAL:** |  |

**PROJECT 3:**

|  |  |
| --- | --- |
| **PROJECT** | |
| Acronym: |  |
| Grant Agreement number: |  |
| HE Call: |  |
| Fields of Science: |  |
| Duration (months): |  |
| Number or partners: |  |
| Total Budget of the project: |  |
| Budget of the UPV/EHU: |  |
| **TOTAL:** |  |

|  |  |
| --- | --- |
| **REQUESTED BUDGET** | |
| Personnel Costs: |  |
| Consumables: |  |
| Travel and subsistence expenses: |  |
| Miscellaneous expenses: |  |
| **TOTAL:** |  |

1. **ERC PROPOSALS:**

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| --- | --- |
| **ERC PROPOSAL** | |
| Acronym: |  |
| Proposal number: |  |
| HE Call: |  |
| Panel: |  |
| Number or partners: |  |
| **Total Budget of the project:** |  |

|  |  |  |
| --- | --- | --- |
| **REQUESTED BUDGET** | | |
| Personnel Costs: |  | |
| Consumables: |  | |
| Travel and subsistence expenses: |  | |
| Miscellaneous expenses: |  | |
| **TOTAL:** |  | |
| **DECLARATION OF RESPONSIBILITY BY THE UNDERSIGNED** | |

*The undersigned hereby DECLARE that they are aware of, and accept:*

* *They responsibility for ensuring that the data contained in this application are true.*
* *They are not subject to any type of restrictions or incompatibilities as regards their participation in this application.*

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| ***Principal Investigator (PI)*** | | | | | |
| ***No.*** | ***Name and Surname*** | ***DNI [Spanish National Identification Number]/ID*** | ***ORCID code*** | ***Department*** | ***Digital Signature \**** |
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| --- | --- | --- | --- | --- | --- |
| ***Members of the research team*** | | | | | |
| ***No.*** | ***Name and Surname*** | ***DNI [Spanish National Identification Number]/ID*** | ***ORCID code*** | ***Department*** | ***Digital Signature \**** | |
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*Add as many rows as necessary.*

*\*All signatures must always be electronic and supported by a recognized certificate*