**FLAG-ERA JTC 2019**

**Human Brain Project (HBP) Flagship Partnering Proposal**

This form must be filled in and submitted for each step of the evaluation along with the main proposal description document. It is expected to be prepared in concertation with Flagship members, (whether they are partners of the proposed project or not). Once submitted, unless the applicant opt out of this possibility, this form is forwarded to Flagship representatives listed on the call page in order to get feedback. This feedback is provided to the applicant via the Joint Call Secretariat. Direct contacts with these Flagship representatives are welcome at any time.

For applicants invited to submit a full proposal in the second step of the evaluation, the present Flagship Partnering proposal may be updated. However, changes, if any, should be described and be duly justified below.

Coordinators of projects recommended for funding will be able to reuse this form as is in order to proceed with the association with the HBP. Note that organisations that are not yet member of the HBP Flagship will have to submit an additional document for becoming Associated Member, to be found on the HBP web site (section on Partnering Projects).

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| **For the evaluation 2nd step only: Changes with respect to the pre-proposal, if any** |
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| **Project identification** | |
| Title |  |
| Acronym |  |
| Start date |  |
| Duration *(in months)* |  |
| **Project coordinator** | |
| First and last name |  |
| Email |  |
| Affiliation (Organisation/ Institute, Laboratory, Department, etc.) |  |
| Country |  |
| **Ethics Rapporteur**  Note: Activities conducted in a PP need to comply with the Ethics Compliance and other Ethics Management processes of the HBP as described on the [Ethics Management website](https://www.humanbrainproject.eu/de/ethics-management). This includes the nomination of an Ethics Rapporteur, responding to the ethics compliance survey and, where applicable, the submission of any ethics approvals and related documents. | |
| First and last name |  |
| Email |  |
| Affiliation (Organisation/ Institute, Laboratory, Department, etc.) |  |
| Country |  |
| **Project summary** | |
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| **Interactions with the Flagship Core Project** |
| **Expected added value for the project to join the HBP Flagship as a Partnering Project** |
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| **Contribution to the HBP Flagship objectives, complementarity with the HBP Flagship Core Project** |
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| **Foreseen interactions and organisation to facilitate alignment and information flow between the Partnering Project and the HBP Flagship Core Project** |
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| **HBP Flagship Core Project Subproject(s) with which interactions are foreseen** |
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| **List of all institutions involved in the project. Please tick the appropriate box:**   1. **Applies to become new Associated Member** 2. **Existing Core Project partner** 3. **Existing Associated Member**   *Please select only one option. Note that, if one institution is already partner of the Core Project or an Associated Member, then it cannot become a new Associated Member.* | | | |
| Organisation 1 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |

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| --- | --- | --- | --- |
| Organisation 2 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |

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| Organisation 3 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Email |  | | |
| Phone |  | | |

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| Organisation 4 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |

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| Organisation 5 | | | |
| Name |  | | |
| Acronym (if applicable) |  | | |
| Type *(Large enterprise, SME, Private/Public Research Organisation, Other-please specify)* |  | | |
| Country |  | | |
| Status within the HBP Flagship | A | B | C |
| **X** | **X** | **X** |
| Principal Investigator for the project | | | |
| Name |  | | |
| Email |  | | |
| Position/function |  | | |
| Institute, laboratory, department, group, team |  | | |
| Co-investigators | | | |
| Name/ email |  | | |
| Name/ email |  | | |
| Admin contact point (if applicable) | | | |
| Name |  | | |
| Position |  | | |
| Email |  | | |
| Phone |  | | |

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| **Funding information** | |
| Funding source and amount | |
| Funding organisation |  |
| Country / region |  |
| Funding amount (in € and/or local currency) |  |
| Funding source and amount | |
| Funding organisation |  |
| Country / region |  |
| Funding amount (in € and/or local currency) |  |
| Funding source and amount | |
| Funding organisation |  |
| Country / region |  |
| Funding amount (in € and/or local currency) |  |
| Funding source and amount | |
| Funding organisation |  |
| Country / region |  |
| Funding amount (in € and/or local currency) |  |