



## Project Grants (HP-PJ)

### Administrative forms (Part A) Project proposal (Part B)

Version 2.0  
05 June 2015

#### **Disclaimer**

This document is aimed at informing potential applicants for 3<sup>rd</sup> EU Health Programme funding. It serves only as an example. The actual Web forms and templates, provided in the online proposal submission system under the Participant Portal, might differ from this example. Proposals must be prepared and submitted via the Electronic Submission System under the Participant Portal.

## History of changes

Version	Date	Change	Page
1.1	15.07.2014	* in Part A: Duration in months changed into an open field	2
2	05.06.2015	* Up to 4 fixed keywords can be chosen out of a dropdownlist	2 of form A
		* Declaration on ethical principles has been removed	3 of form A
		* Reference to Chafea's Privacy Statement updated	3 of form A
		* Administrative data of the organisation contains more attributes	5 of form A
		* Budget structure updated (applicants own contribution deleted); Receipts instead of Income	10 of form A
		* confidential deliverables will only be accepted in duly justified and exceptional cases	7 of form B
		* Explanation on Financial contribution given by third parties included	10 of form B
		* Staff function in detailed budget table under staff costs included	11 of form B

## 3<sup>rd</sup> Health Programme

Call:

Topic:

Type of action:

Proposal number:

Proposal acronym:

### Table of contents

Section	Title	Action
1	General information	
2	Participants & contacts	
3	Budget	

#### How to fill in the forms

The administrative forms must be filled in for each proposal using the templates available in the submission system. Some data fields in the administrative forms are pre-filled based on the previous steps in the submission wizard.

Proposal ID

Acronym

## 1 - General information

Topic

Type of action

Call identifier

Acronym

Proposal title\*

*Max 200 characters (with spaces). Must be understandable for non-specialists in your field.*

*Note that for technical reasons, the following characters are not accepted in the Proposal Title and will be removed: < > " &*

Duration in months

*Estimated duration of the project in full months.*

Free keywords

*Enter any words you think give extra detail of the scope of your proposal (max 200 characters with spaces).*

### Abstract

*Short summary (max. 2,000 characters, with spaces) to clearly explain:*

- the objectives of the proposal*
- how they will be achieved*
- their relevance to the work programme.*

*Will be used as the short description of the proposal in the evaluation process and in communications with the programme management committees and other interested parties .*

- Do not include any confidential information.*
- Use plain typed text, avoiding formulae and other special characters.*

Remaining characters

2000

Has this proposal (or a very similar one) been submitted in the past 2 years in response to a call for proposals under the EU Health Programme, 7th Framework Programme, Horizon 2020 or any other EU programme(s)? ☐ Yes ☐ No

Proposal ID

Acronym

## Declarations

1) The coordinator declares to have explicit consent of all applicants on their participation and on the content of this proposal.*	<input type="checkbox"/>
2) The information contained in this proposal is correct and complete.	<input type="checkbox"/>

3) The coordinator confirms that:

-he/she carried out for the coordinator's organisation the financial capacity self-check and has received confirmation from each participant that they have carried out the same at <a href="https://ec.europa.eu/research/participants/portal/desktop/en/organisations/lfv.html">https://ec.europa.eu/research/participants/portal/desktop/en/organisations/lfv.html</a> unless the coordinator or any participant is exempt from the check being a public body.	<input type="checkbox"/>
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4) The coordinator hereby declares that each applicant has confirmed:

- that if it is receiving an Operating Grant from any EU programme, it will not claim indirect costs for this action for the specific year covered by the Operating Grant.	<input type="checkbox"/>
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5) The coordinator hereby declares that each applicant has confirmed:

- all applicants are fully compliant with the exclusion and eligibility criteria set out in the specific call for proposals; and	<input type="checkbox"/>
- all applicants have stable and sufficient sources of funding to maintain their activity throughout the period during which the activity is being carried out and to participate in its co-financing; and	<input type="checkbox"/>
- all applicants have the professional resources, competences and qualifications required to complete the proposed action.	<input type="checkbox"/>

The coordinator is only responsible for the correctness of the information relating to his/her own organisation. Each applicant remains responsible for the correctness of the information related to him/her and declared above. If the proposal to be retained for EU funding, the coordinator and each beneficiary will be required to present a formal declaration in this respect.

According to Article 131 of the Financial Regulation of 25 October 2012 on the financial rules applicable to the general budget of the Union (Official Journal L 298 of 26.10.2012, p. 1) and Article 145 of its Rules of Application (Official Journal L 362, 31.12.2012, p.1) applicants found guilty of misrepresentation may be subject to administrative and financial penalties under certain conditions.

### Personal data protection

Your reply to the grant application will involve the recording and processing of personal data (such as your name, address and CV), which will be processed pursuant to Regulation (EC) No 45/2001 on the protection of individuals with regard to the processing of personal data by the Community institutions and bodies and on the free movement of such data. Unless indicated otherwise, your replies to the questions in this form and any personal data requested are required to assess your grant application in accordance with the specifications of the call for proposals and will be processed solely for that purpose. Details concerning the processing of your personal data are available on the [privacy statement](#). Applicants may lodge a complaint about the processing of their personal data with the European Data Protection Supervisor at any time.

Your personal data may be registered in the Early Warning System (EWS) only or both in the EWS and Central Exclusion Database (CED) by the Accounting Officer of the Commission, should you be in one of the situations mentioned in:

- the Commission Decision 2008/969 of 16.12.2008 on the Early Warning System (for more information see the [Privacy Statement](#)), or
- the Commission Regulation 2008/1302 of 17.12.2008 on the Central Exclusion Database (for more information see the [Privacy Statement](#)).

You can consult Chafea's Privacy Statement on Grants at: [http://ec.europa.eu/chafea/about/data\\_protection.html](http://ec.europa.eu/chafea/about/data_protection.html)



Proposal ID

Acronym

## List of participants

#	Participant Legal Name	Country
1		

Example, not to complete



Proposal ID

Acronym

Short name

## 2 - Administrative data of the organisation

**PIC****Legal name***Short name:**Address of the organisation*

Street

Town

Postcode

Country

Webpage

*Legal Status of your organisation***Research and Innovation legal statuses**

Public body ..... unknown

Legal person ..... unknown

Non-profit ..... unknown

International organisation ..... unknown

International organisation of European interest ..... unknown

Secondary or Higher education establishment ..... unknown

Research organisation ..... unknown

**Enterprise Data**

SME self-declared status ..... unknown

SME self-assessment ..... unknown

SME validation sme..... unknown

**Based on the above details of the Beneficiary Registry the organisation is not an SME (small- and medium-sized enterprise) for the call.**

NACE Code: -



Proposal ID

Acronym

Short name

*Department(s) carrying out the proposed work***Department 1**

Department name

☐ Same as organisation address

Street

Town

Postcode

Country

If the location of the Department carrying out the proposed work is not the same as the location of the Host Institute, please note that although the proposal submission system calculates the budget of the project based on the location of the Host Institute, the budget of the project for the grant agreement will be calculated by using the country coefficient of the location of the Department carrying out the proposed work.

Example, not





Proposal ID

Acronym

Short name

*Person in charge of the proposal*

The name and e-mail of contact persons are read-only in the administrative form, only additional details can be edited here. To give access rights and basic contact details of contact persons, please go back to Step 4 of the submission wizard and save the changes.

Title

Sex

☐

Male

☐

Female

First name

Last name

E-Mail

Position in org.

Department

☐ Same as organisation address

Street

Town

Post code

Country

Website

Phone

Phone 2

Fax

Example,

Proposal ID

Acronym

Go to

### 3 - Budget for the proposal

- Actions co-funded under the third Health Programme may receive a co-funding of up to 80% of the total eligible cost for the action, if they are deemed to be of exceptional utility towards achieving the objectives of the Programme. To receive up to 80% of co-funding, the proposals must comply with the criteria set out below:
- ☐ 1. At least 60 % of the total budget of the action is used to fund staff *(This criterion intends to promote capacity building for development and implementation of effective health policies)*.
- ☐ 2. At least 30 % of the budget of the proposed action is allocated to Member States whose gross national income (GNI, as published by EUROSTAT) per inhabitant is less than 90 % of the Union average. *(This criterion intends to promote the participation of health actors from Member States with a low GNI)*.
- ☐ 3. The proposal demonstrates excellence in furthering public health in Europe and has a very high EU added value.

No	Participant	Country	Direct personnel costs/€	Direct costs of subcontracting	Other direct costs	Indirect costs (max 7% on a, b and c) <sup>3</sup>	Total estimated eligible costs	Reimbursement rate (%)	Maximum EU contribution	Maximum Grant amount <sup>2</sup>	Income generated by the action	Financial contributions given by third parties to the beneficiary	Action's total receipts
			(a)	(b)	(c)	(d) = 0.07 * ((a)+(b)+(c))	(e) = (a)+(b)+(c)+(d)	(f)	(g) = (e)*(f)	(h)	(k)	(l)	(m) = (k) + (l)
1			0	0	0	0	0			0	0	0	0
Total			0	0	0	0	0	60	0	0	0	0	0

\*1) The requested Grant per beneficiary can be up to the total eligible cost of this beneficiary. In total at project level, the EU funding shall not be higher than the Maximum Reimbursement Rate (60% or 80% in cases of exceptional utility).

\*2) If a particular beneficiary is requesting more than 750.000 Euro EU contribution, an audit report produced by an approved external auditor shall be submitted. That report shall certify the accounts for the last financial year available.

\*3) If an organisation is receiving an Operating Grant under any EU programme, it is not eligible for indirect costs in the respective year covered by the Operating Grant. In this case, please deduct the respective portion in this proposal.

Proposal ID	Acronym	Go to
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The column names are not in the alphabet order but they are in line with the budget table of the grant agreement



Proposal ID

Acronym

## Validation result

Show Error

The red 'Show Error' button indicates an error due to a missing or incorrect value related to the call eligibility criteria. The submission of the proposal **will be blocked** unless that specific field is corrected!

Show Warning

The yellow 'Show Warning' button indicates a warning due to a missing or incorrect value related to the call eligibility criteria. The submission of the proposal **will not be blocked** (proposal will be submitted with the missing or incorrect value).

### Section

### Description

The form has not yet been validated, click "Validate Form" to do so!

Example, not to complete



# Proposal template

## Project Grants (HP-PJ) 3<sup>rd</sup> EU Health Programme

Please follow the structure of this template when preparing your proposal. It has been designed to ensure that the important aspects of your planned work are presented in a way that will enable the evaluators to make an effective assessment against the evaluation criteria.

Please be aware that proposals will be evaluated as they were submitted, rather than on their potential if certain changes were to be made. This means that only proposals that successfully address all the required aspects will have a chance of being funded. There will be no possibility for significant changes to content, budget and consortium composition during grant preparation.



**Page limit:** All sections should not be longer than 80 pages. All tables in these sections must be included within this limit (including a table of contents). The minimum font size allowed is 11 points. The page size is A4, and all margins (top, bottom, left, right) should be at least 15 mm (not including any footers or headers).

If you attempt to upload a proposal longer than the specified limit, before the deadline you will receive an automatic warning, and will be advised to shorten and re-upload the proposal. After the deadline, any excess pages will be overprinted with a 'watermark', indicating to evaluators that these pages must be disregarded.

Please do not regard the page limit as a target! It is in your interest to keep your text as concise as possible, since experts rarely view unnecessarily long proposals in a positive light.



Please read and follow carefully the instructions given in the Guide for applicants, which is outlining in detail the requirements for the below section of your proposal.

## COVER PAGE

### TITLE OF PROPOSAL

### LIST OF APPLICANTS

Applicant No*	Applicant organisation name	Country
1 (Coordinator)		
2		
3		
4		

\* Please use the same applicant numbering as that used in the administrative proposal forms.

### TABLE OF CONTENTS

## 1. PROBLEM ANALYSIS INCLUDING EVIDENCE BASE

- Your proposal must describe the problem statement, analysis of the causes and evidence base of the proposed measure(s) and methods.

## 2. AIMS AND OBJECTIVES OF THE PROJECT

### 2.1. General objective of the project

### 2.2. Specific objective(s) of the project

- Please describe your specific objectives following the SMART approach.
- Please state the planned methods of verification that you reached your objectives using clear and precise indicators.

Specific Objective Number		
Specific Objective		
Process Indicator(s)		Target
(repeat line as needed)		
Output Indicator(s)		Target
(repeat line as needed)		
Outcome/Impact Indicator(s)		Target
(repeat line as needed)		

### **3. TARGET GROUPS**

### **4. POLITICAL RELEVANCE**

**4.1. Contribution to meeting the objectives and priorities defined in the annual work programme**

**4.2. Added value at EU level in the field of public health**

**4.3. Pertinence of geographical coverage**

**4.4. Consideration of the social, cultural and political context**

### **5. METHODS AND MEANS**

### **6. EXPECTED OUTCOMES**



## 7. WORK PACKAGES

### 7.1. Overview on work packages

WP number	Title	Description
1	Coordination of the project	Actions undertaken to manage the project and to make sure that it is implemented as planned
2	Dissemination of the project	Actions undertaken to ensure that the results and deliverables of the project will be made available to the target groups
3	Evaluation of the project	Actions undertaken to verify if the project is being implemented as planned and reaches the objectives
4		
5		
6		
...		
x		

## 7.2. Work package descriptions

- For each work package, your proposal must describe a table as below

<b>Work package number</b>												
<b>Work package title</b>												
<b>Starting month</b>				<b>Ending month</b>								
<b>Leading applicant</b>												
<b>Applicants Nr</b>												
<b>Applicants Acronym</b>												
<b>Person month per applicant</b>												
<b>Objectives</b>												
<b>Description of work</b> (where appropriate, broken down into tasks), lead partner and role of applicants												
<b>Deliverables linked to this work package</b> (brief description, month of delivery, reference to the list of deliverables)												
<b>Milestones to be reached by this WP</b>												

### 7.3. Timetable or Gantt Chart

- Your proposal must illustrate the work packages, milestones and delivery dates of deliverables in a graphical form, such as a timetable or Gantt chart.

### 8. MILESTONES AND DELIVERABLES

- Your proposal must indicate milestones and deliverables.
- Deliverable numbers** in order of delivery dates. Please use the numbering convention <WPnumber>.<number of deliverable within that WP>. For example, deliverable 4.2 would be the second deliverable from work package 4.

- Dissemination level:** Use one of the following codes:

PU = Public, fully open, e.g. web

CO = Confidential, restricted under conditions set out in Model Grant Agreement (If a deliverable is labelled confidential, please describe the reasons for the confidentiality. The objective is to make the results of all actions as widely accessible as possible, therefore confidential deliverables will only be accepted in duly justified and exceptional cases).

- Delivery month:** Measured in months from the project start date (month 1). If a deliverable consists of several parts (eg. a newsletter to be delivered in M6, M12 and M18) please list it as 1 deliverable and state the different delivery month in the last column.
- Technical reports (Periodic Report or Final Report), Leaflet, Layman Brochure and website are considered **mandatory deliverables**. They are already included in the table below and must be kept. They are named ("MD.x").

Deliverable Number	Deliverable Name	Work package number	Leading applicant acronym	Content specification	Dissemination level	Delivery month
<b>Mandatory deliverables (MD)</b>						
MD.1	Interim report(s)	1	The coordinator	This report describes the activities carried out, milestones and results achieved in the first half of the project. Deliverables can be attached as annexes.		
MD.2	Final report	1	The coordinator	This report describes the project implementation and the results achieved. The deliverables are		End of project

				annexed.		
MD.3	Leaflet	2		A leaflet to promote the project must be produced at the beginning	P	3
MD.4	Layman version of the final report	2		This is a short (e.g. 10 pages) version of the final report, written for the interested public as a target group.	P	End of project
MD.5	Web-site	2		Each project must have a dedicated web-site / web-pages. This can have a public part and another one accessible only to the applicants.	P (and C)	3

## **9. PROJECT MANAGEMENT STRUCTURE**

### **9.1. Quality of the partnership**

### **9.2. Capacity of the staff**

### **9.3. External and internal risk analysis and contingency planning**

<b>Identified Risk</b>	<b>Likelihood</b>	<b>Impact</b>	<b>Contingency planning</b>

### **9.4. Financial management**

## 10. BUDGET

### 10.1. Content description and justification

- Please describe how you have built the budget and the rationale for doing so.

### 10.2. Financial contribution given by third parties

- Please describe the sources, amount and nature of any financial contribution given by third parties to the project/beneficiaries.
- In case of a potential conflict of interest, please describe the necessary measures to prevent any situation where the impartial and objective implementation of the project is compromised for reasons involving economic interest, political or national affinity, family or emotional ties or any other shared interest.

### 10.3. Summary of staff effort

- Please indicate the number of person/months over the whole duration of the planned work, for each work package, for each applicant.
- Identify the work-package leader for each WP by showing the relevant person-month figure in bold.

	WP n	WP n+1	WP n+2	Total Person/ Months per Applicant
Applicant Number/ Short Name				
Applicant Number/ Short Name				
Applicant Number/ Short Name				
Total Person/Months				

## 10.4. Detailed budget

- Please complete the table below for each applicant/ affiliated entity. If a particular applicant is an affiliated entity, please state to which partner it is affiliated (second line).
- Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

<b>Applicant Number/ Short Name</b>			
(If affiliated entity: Affiliated to which Applicant number/Short name)			
<b>(A) Direct personnel costs</b>			
<b>Staff function</b>	<b>Monthly Cost</b>	<b>Estimated Person-month</b>	<b>Sum Cost (€)</b>
(Please repeat line for each staff function category)			
		<b>Total person month</b>	<b>Total Costs (€) for (A)</b>
	<b>Justification</b>		
<b>(B) Direct costs of sub-contracting</b>	<b>Costs (€)</b>	<b>Task(s)/Justification</b>	
(please repeat line for each subcontract foreseen)			
<b>Total Costs (€) of (B)</b>			
	<b>Justification</b>		
<b>(C) Other direct costs</b>			
<b>(C.1) Travel</b>	<b>Costs (€)</b>	<b>Justification</b>	
<b>(C.2) Equipment</b>	<b>Costs (€)</b>	<b>Justification</b>	
<b>(C.3) Other goods and services</b>	<b>Costs (€)</b>	<b>Justification</b>	
<b>Total Costs (€) of (C)</b>			
<b>(D) Indirect Costs</b>	<b>Total Costs (€)</b>		
(Max. 7% on A, B and C)			
<b>Total estimated eligible costs</b>			

### **11. PREVIOUS AND CURRENT GRANTS RELEVANT TO THE PROGRAMME (LIMITED TO THE LAST 3 YEARS)**

### **12. CURRENT APPLICATIONS RELEVANT TO THE PROGRAMME**

### **13. EXCEPTIONAL UTILITY**

Please describe, if and how your proposal would fulfil the criteria for exceptional utility.

### **14. COLLABORATING STAKEHOLDERS**

Collaborating stakeholders and/or external experts are organisations or individual persons, which:

- May significantly increase the technical and scientific content of the project, as well as its relevance for different users in the Union.
- have no contractual relationship with the Agency
- nor do receive any EU funding from this particular grant;

Please give a list of up to 20 most important collaborating stakeholders and/or external experts participating in your project. Note that it is not mandatory to involve collaborating stakeholders and/or external experts.

<b>Institution</b>	<b>Contact person (First name and last name)</b>	<b>City &amp; Country</b>