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EARLY CAREER AWARD

*II Edition*

PROPOSAL APPLICATION FORM

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# GENERAL INFORMATION

**Report here the same information included in the platform.**

## Project title

*Insert a descriptive title of the project, max. 100 characters including spaces.*

|  |
| --- |
|  |

## Project acronym

*Max. 15 characters including spaces. Make sure to add the acronym between the square brackets in the header of the form as well.*

|  |
| --- |
|  |

## Project ID

*Enter here the ID number generated by the platform.*

|  |
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|  |

## Research areas and reward topics

*Tick (use “X”) the appropriate box to specify which of the 4 research areas this proposal addresses (choose only one). If applicable, tick also the related reward topic for the chosen research area.*

|  |  |
| --- | --- |
|  | **CARDIOVASCULAR AREA** |
|  |  |
|  |  | *Topic 1 – Out-of-hospital cardiac arrest (OHCA): identification of cardiovascular genetic-molecular causes.* |
|  |  |
|  |  |  |
|  |  | *Topic 2 – Coronary Artery Disease: morpho-functional basis of acute plaque instability. In vivo identification of new risk factors and/or markers.* |
|  |  |
|  |  |  |
|  |  | *Not Applicable* |
|  |  |  |
|  | **ONCOLOGICAL AREA** |
|  |  |
|  |  | *Topic 1 – Development of cell therapies for oncological and onco-hematological diseases.* |
|  |
|  |  |  |
|  |  | *Topic 2 –* *Development of therapies and diagnostic approaches based on nuclear medicine.* |
|  |  |
|  |  |  |
|  |  | *Not Applicable* |
|  |  |  |
|  | **NEUROLOGICAL AREA** |
|  |  |
|  |  | *Topic 1 – Diagnostic and therapeutic innovation in the treatment of neuromuscular diseases.* |
|  |  |
|  |  |  |
|  |  | *Topic 2 – Free radicals, oxidative stress and neurological damage: diagnostic and therapeutic innovation for neurodegenerative diseases.* |
|  |  |
|  |  |  |
|  |  | *Not Applicable* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  | **RARE DISEASES AREA** |
|  |  |
|  |  | *Topic 1 – Early diagnosis, cell therapies, new therapeutic approaches, new molecules and surgical innovations for the treatment of pediatric and/or adult rare genetic diseases.* |
|  |  |
|  |  |  |
|  |  | *Topic 2 – Neonatal screening.* |
|  |  |  |
|  |  | *Not Applicable* |

## Keywords

*Enter 3 keywords that describe your project.*

|  |
| --- |
|  |

## Total requested budget

*Enter the total funding request (in euro) for the entire project period considering a maximum total amount of € 500.000,00. In case of differences, the amount inserted in the platform will prevail.*

|  |
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# PROJECT DESCRIPTION

1.

## Scientific abstract

*The abstract should provide a concise and clear description of the project objective(s) and of the proposed work to achieve them. Max. 1.200 characters including spaces.*

|  |
| --- |
|  |

## Scientific background

*Max. 3.000 characters including spaces.*

|  |
| --- |
|   |

## Preliminary data

*Max. 3.000 characters including spaces.*

|  |
| --- |
|  |

## Figures and tables

*Insert here figures and/or tables supporting the preliminary data. Max. 1 page.*

## Research hypothesis and specific aims

*Describe here how the proposal fits the scope of the call, the personalized medicine dimension of the proposed work, the rational, specific objectives and the overall strategy of the proposed research, highlighting the novelty and feasibility, and the potential impact of the project results on health care. Max 2.000 characters including spaces.*

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## Experimental plan (work packages)

*Max. 10.000 characters including spaces (overall).*

*Report, for each work package (WP): (a) the WP number and title (****max. 5 WPs****), (b) its objective(s), (c) tasks, and related activities, (d) methodology used, (e) milestones1 (****max. 2 milestones for each WP****), (f) expected results and deliverables2 (****max. 2 deliverables for each WP****), and (g) a contingency plan to mitigate any pitfalls and caveats. In case of clinical studies/trials a scheme of the study design must be provided (max. 1 page). As stated in paragraph B.2.3 of the call text, for projects involving clinical trials, enrolment of patients and/or healthy subjects and/or the collection of human material and/or data, approval(s) by the Competent Regulatory Authority are due before the project start. Therefore, the achievement of such approval(s) cannot be a milestone or a deliverable.*

|  |
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## Gantt chart

*Insert here the Gantt chart. The Gantt must report the WPs as described in section 2.6, their duration (in months), the milestones described in section 2.8 and the deliverables described in section 2.9.*

## List of milestones[[1]](#footnote-2)

*Fill in the table below.*

|  |  |  |  |
| --- | --- | --- | --- |
| Related WP | MilestoneNumber | Milestone Name | Due Month |
| 1 | M1.1 |  |  |
| 1 | M1.2 |  |  |
| 2 | M2.1 |  |  |
| … | … |  |  |

*[Note: add rows if necessary]*

## List of deliverables[[2]](#footnote-3)

*Fill in the table below.*

|  |  |  |  |
| --- | --- | --- | --- |
| Related WP | Deliverable Number | Deliverable Name | Due Month |
| 1 | D1.1 |  |  |
| 1 | D1.2 |  |  |
| 2 | D2.1 |  |  |
| … | … |  |  |

*[Note: add rows if necessary]*

## Potential impact of expected project results on the regional healthcare system, patient wellbeing and personalized medicine advancement

*Max. 2.000 characters including spaces.*

|  |
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|  |

## Dissemination[[3]](#footnote-4) and communication[[4]](#footnote-5) plan/activities

*The gender dimension needs to be considered in these activities. Max. 2.000 characters including spaces.*

|  |
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## Implementation of Responsible Research and Innovation (RRI) principles

*Gender-related issues - i.e., gender equality and gender/sex[[5]](#footnote-6) dimension aspects - need to be considered in the proposed project. Max. 2.000 characters including spaces.*

|  |
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## Ethics

*Fill in the table below.*

|  |  |  |
| --- | --- | --- |
| **ETHICS TABLE** | **YES** | **NO** |
| Does your research involve human participants (human material and/or data, healthy volunteers and/or patients)? |  |  |
| Does your research need approval from the Competent Regulatory Authority[[6]](#footnote-7)? |  |  |
| If YES, specify which Competent Regulatory Authority needs to approve your research activities. |  |
| Does your research involve animals? |  |  |
| If YES, starting from which month of the project? *(e.g. month 1)* |  |
| Does your research need approval from the Italian Ministry of Health for the use of laboratory animals? |  |  |

## References

*List up to 15 references related to the project, providing the DOI and link to the publication.*

|  |  |  |  |
| --- | --- | --- | --- |
| Number | Title | DOI | Link |
| 1 |  |  |  |
| 2 |  |  |  |
| … |  |  |  |

*[Note: add rows if necessary]*

# PRINCIPAL INVESTIGATOR

1.

## General Information

*Fill in the table below.*

|  |  |
| --- | --- |
| Name |  |
| Surname |  |
| Title |  |
| ORCID iD |  |
| h-index[[7]](#footnote-8) |  |

## Education and training

*List in reverse chronological order your degree(s)obtained and any professional training, if applicable.*

|  |  |  |  |
| --- | --- | --- | --- |
| Degree | Field of Study | Institution | Duration(from MM/YYYY to MM/YYYY) |
|  |  |  |  |

*[Note: add rows if necessary]*

## Position(s) and job experiences

*List in reverse chronological order your present and previous position(s) and most relevant job experiences and appointments. Indicate in this section any career break.*

|  |  |  |
| --- | --- | --- |
| Role | Institution | Duration (from MM/YYYY to MM/YYYY) |
|  |  |  |

*[Note: add rows if necessary]*

## Publications

*List in reverse chronological order your most relevant publications.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title | Author position[[8]](#footnote-9) | DOI | Journal | Year | IF |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

*[Note: add rows if necessary]*

## Fellowships and awards

*List in reverse chronological order any fellowships, traineeships and/or awards you have received, the awarding organisation, the context or occasion of the support received and the duration/year of award, if applicable.*

|  |  |  |  |
| --- | --- | --- | --- |
| Type | Awarding organization | Context | Duration\*/Year (\*from MM/YYYY to MM/YYYY) |
|  |  |  |  |

*[Note: add rows if necessary]*

## Research contributions and outputs

*Describe here your most important research contributions[[9]](#footnote-10) and outputs[[10]](#footnote-11) (other than scientific publications), specifying also the year and its importance to the field. Max. 2.000 characters including spaces and references.*

|  |
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## Other ongoing and pending funding of the PI

*List all your grants (active, approved and pending) according to the table below. Please indicate “N/A” if applicable.*

|  |
| --- |
| Active Grants, Approved and/or Pending Grant Applications |
| Project Number and Title | Funding Organization | Funding Amount (in euros) | Funding Period\*(start – end date) | Your Role in the Project | Effort dedicated to the Project (in %) | Explanation of any relation with the current application (if applicable) |
|  |  |  |  |  |  |  |

*\*Specify if funding is active (Ac), approved (Ap) or pending (P).*

*[Note: add rows if necessary]*

## PI’s biographical sketch

*Describe to what extent you are suitably qualified and motivated to be a Principal Investigator and carry out this project. Max. 2000 characters including spaces.*

|  |
| --- |
|  |

# RESEARCH TEAM, INFRASTRUCTURES AND PROJECT MANAGEMENT

1.

## Team members

*Fill in the table below.*

|  |  |  |  |
| --- | --- | --- | --- |
| Name and Surname | Role[[11]](#footnote-12) in the project, involvement in WPs and global effort (person months)*Max. 500 characters for each team member* | Salary requested to FRRB | If YES, specify the amount requested/year (€) |
| YES | NO |
|  |  |  |  |  |
|  |  |  |  |  |

*[Note: add rows if necessary]*

## Project management and infrastructures

*Describe how the project will be managed, the scientific environment in which the research will be done and any institutional facilities, resources and equipment available to the PI and the research team. Max. 2.000 characters including spaces.*

|  |
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# BUDGET JUSTIFICATION

*Fill in the table below, specifying also for each category the requested amount (in euro). In case of differences, the amount inserted in the platform shall prevail.*

|  |  |
| --- | --- |
| Eligible costs | Justification |
| Personnel[[12]](#footnote-13) (A) € … |  |
| Travel costs (B)€ … |  |
| Costs for participating in conferences, seminars and other training events related to the project (C)€ … |  |
| Materials and supplies (D)€ … |  |
| Equipment (E)€ … |  |
| Subcontracting[[13]](#footnote-14) (F)€ … |  |
| Other direct costs (G)€ … |  |
| Overheads (H)€ … |  Flat rate of 20% on direct costs (subcontracting excluded) |

# LIST OF ABBREVIATIONS

*Provide a list of all abbreviations and acronyms used throughout the proposal. No page limit.*

1. *Control or decision point in the project that helps to monitor and measure progress.* [↑](#footnote-ref-2)
2. *A tangible or intangible output produced as a result of the project activities.* [↑](#footnote-ref-3)
3. *For more details, please refer to https://ec.europa.eu/research/participants/docs/h2020-funding-guide/grants/grant-management/dissemination-of-results\_en.htm* [↑](#footnote-ref-4)
4. *For more details, please refer to https://ec.europa.eu/research/participants/docs/h2020-funding-guide/grants/grant-management/communication\_en.htm* [↑](#footnote-ref-5)
5. *For more details, please refer to* *https://cihr-irsc.gc.ca/e/50833.html* [↑](#footnote-ref-6)
6. *Examples of Competent Regulatory Authorities are, but are not limited to, Ethics Committee, AIFA, Istituto Superiore di Sanità, Italian Ministry of Health, Research Ethics Board.* [↑](#footnote-ref-7)
7. *Use Scopus:* <https://www.scopus.com/freelookup/form/author.uri> [↑](#footnote-ref-8)
8. *Examples include, but are not limited to, first, last, corresponding or other.* [↑](#footnote-ref-9)
9. *Examples include, but are not limited to, invited lectures or presentations, organisations of meetings, teaching or mentoring activities, reviewing activities or engagement activities with public or other stakeholders.* [↑](#footnote-ref-10)
10. *Examples include, but are not limited to, data sets, software, patents and copyrights.* [↑](#footnote-ref-11)
11. *Examples include, but are not limited to, Principal Investigator, PhD Student, Post Doc Researcher, Technician, etc.* [↑](#footnote-ref-12)
12. *Please detail number of person months (PM), qualification (****Si****: scientist, e.g. postdoc;* ***PhD****: PhD-student;* ***N****: non-scientist, e.g. technician;* ***Ot****: other) and € requested.* [↑](#footnote-ref-13)
13. *Please remember to include under this category the amount for the audit certificate eligible for a maximum amount of € 8.000,00.* [↑](#footnote-ref-14)