A picture containing graphical user interface

Description automatically generatedESFRI-FED  
PROGRAMME

IN SUPPORT OF THE VALORISATION OF BELGIAN FEDERAL

COMPONENTS IN ESFRI DISTRIBUTED AND VIRTUAL INFRASTRUCTURES  
PHASE 1 – [2021-2025]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROPOSAL DESCRIPTION : [ACRONYM]  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# FULL PROPOSAL ESFRI-FED CALL 2021-2022

**PART A: GENERAL INFORMATION**

## GENERAL INFORMATION

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Acronym of the project |  | | | | | |
| Title of the project |  | | | | | |
| Institution coordinating the project |  | | | | | |
| Partner institution(s) |  | | | | | |
| ESFRI concerned by the project |  | | | | | |
| budget max. |  | 400 000€ |  | 750 000€ *(only if there are 2 or more partners)* | | |
| Duration of the project |  | 2 years |  | 3 Years |  | 4 years |

## SUMMARY

*(This part shall not exceed 1/2 page in Calibri 11 font)*

|  |
| --- |
|  |

Keywords:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. |  | 2. |  | 3. |  |
| 4. |  | 5. |  | 6. |  |

## DETAILS OF THE APPLICANTS

##### **COORDINATOR**

|  |  |  |  |
| --- | --- | --- | --- |
| COORDINATOR | | | |
| Surname |  | | |
| Name |  | | |
| Gender | Female | Male | Other: [you may specify if you wish to do so here] |
| Service |  | | |
| Institution |  | | |
| Telephone |  | | |
| Email |  | | |

##### **PARTNER(S)**

*(Please replicate the box below as many times as partners has your network, changing the number of the partner)*

|  |  |  |  |
| --- | --- | --- | --- |
| PARTNER 2 | | | |
| Surname |  | | |
| Name |  | | |
| Gender | Female | Male | Other: [you may specify if you wish to do so here] *(non-binary, transgender, intersex, prefer not to disclose...)* |
| Service |  | | |
| Institution |  | | |
| Telephone |  | | |
| Email |  | | |

**PART B: COMPLIANCE WITH THE SCOPE OF THE CALL & SCIENTIFIC CASE**

## 1. COMPLIANCE WITH THE SCOPE OF THE CALL

*(This part shall not exceed 1/2 page in Calibri 11 font)*

|  |
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|  |

## 2. OBJECTIVES OF THE project

GENERAL AIM OF THE PROJECT

*(This part shall not exceed 1/2 page in Calibri 11 font)*

|  |
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|  |

LIST OF SPECIFIC PROJECT OBJECTIVES

*(Please enunciate the objectives as concisely as possible. Use as many lines as specific objects in the project, but do not add sub-objectives)*

|  |  |
| --- | --- |
| A. |  |
| B. |  |
| C. |  |
| D. |  |
| E. |  |

## 3. JUSTIFICATION OF THE PROJECT

##### **3.1. POSITION AND MOTIVATION OF THE PROJECT**

*(This part shall not exceed 1 page in Calibri 11 font, graphics are not included in the page limitation)*

|  |
| --- |
|  |

##### **3.2. RISK OF THE NON-IMPLEMENTATION OF THE PROJECT**

*(This part shall not exceed 1/2 page in Calibri 11 font)*

|  |  |  |
| --- | --- | --- |
| A. For the Belgian federal component | A1 |  |
| A2 |  |
| A3 |  |
| B. For the FSI / Federal Department | B1 |  |
| B2 |  |
| B3 |  |
| C. For the ESFRI | C1 |  |
| C2 |  |
| C3 |  |

## 4. METHODOLOGY

##### **4.1. MEHODOLOGICAL APPROACH**

*(This part shall not exceed 1/2 page in Calibri 11 font)*

OVERALL METHODOLOGICAL APPROACH

|  |
| --- |
|  |

ANCHORING OF THE SERVICES/ACTIVITIES ISSUED BY THE PROJECT IN THE ESFRI

|  |
| --- |
|  |

##### **4.2. TRANSLATION OF THE PROJECT OBJECTIVES INTO APPROPRIATE AND WELL-DESCRIBED METHODOLOGY**

*(This part shall not exceed 1 page in Calibri 11 font)*

|  |
| --- |
|  |

##### **4.3. GENDER**

*(Cross the statements that better describe your project in terms of gender and briefly comment in the space below how is this considered. This part shall not exceed 1 page in Calibri 11 font).*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A. The project requires considering gender/sex samples/data differentiation |  | Yes |  | No |

*If your answer is ‘yes’: Shortly describe how will sex/gender be addressed in terms of the methodology, how will differentiated samples/data be collected and analysed according to the sex/gender variable.*

|  |
| --- |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| B. The project involves questionnaires, surveys, focus groups... |  | Yes |  | No |

*If your answer is ‘yes’: Briefly explain how the project ensures sex/gender balance within the group of people completing questionnaires or in the focus groups. Shortly describe how the questionnaires have been designed to unravel potentially relevant sex and/or gender differences in the data they will yield.*

|  |
| --- |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| C. The project's outcomes and/or impact may vary depending on sex/gender |  | Yes |  | No |

*If your answer is ‘yes’: Briefly elaborate how these possible differentiated outcomes and impacts have been considered in terms of sex/gender.*

|  |
| --- |
|  |

##### **4.4. ETHICS**

*Research involving activities marked with an asterisk (\*) in the first column require the advice of the ad hoc Board at the level of their institution and an official agreement delivered by the Belgian competent authorities. All relevant authorisations from the specific ethics committee have to be obtained before the beginning of the project.*

*When conducting surveys, interviews, or focus groups where personal information is gathered and stored, data storage, protection, and other relevant issues have to be explained in the data management plan.*

|  |  |  |  |
| --- | --- | --- | --- |
| Humans | | **YES** | **NO** |
| \* | Does the project or the project data involve humans (children, patients, volunteers, vulnerable people) as subjects? |  |  |
| Human Embryo/Foetus | | **YES** | **NO** |
| \* | Does the project or the project data involve human embryos? |  |  |
| \* | Does the project or the project data involve human foetal tissues/cells? |  |  |
| \* | Does the project or the project data involve human embryonic stem cells? |  |  |
| Human Cells and/or Tissues | | **YES** | **NO** |
|  | Does the project or the project data involve the use of human cells or tissues (other than from human embryos and/or foetuses)? |  |  |
| Privacy | | **YES** | **NO** |
|  | Does the project involve collecting and/or processing of genetic information or personal data (e.g. health, sexual lifestyle, ethnicity, political opinion, religious or philosophical conviction)? |  |  |
|  | Does the project or the project data involve tracking the location or observation of people? |  |  |
| Animals | | **YES** | **NO** |
|  | Does the project or the project data involve research on animals? |  |  |
| \* | Are those animals non-human primates? |  |  |
| Environment, Health and Safety | | **YES** | **NO** |
|  | Does your project or your project data involve any activities dealing with elements that may cause harm to the environment, animals, or plants (e.g., GMO plants, microorganisms, etc.)? |  |  |
|  | Does your project or your project data involve the use of elements (toxic chemicals, explosives, radioactive material, etc.) that may cause harm to humans, including the research staff? |  |  |
| Other Ethical Issues | | **YES** | **NO** |
|  | Are there any other foreseen activities that may raise ethical issues or that should be taken in consideration? |  |  |
|  | If yes please specify: | | |

*In the* ***absence of ethical issues****, please provide a brief explanation here (max. 1/2 page in Calibri 11 font):*

|  |
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|  |

**PART C: IMPLEMENTATION CASE**

## 5. PARTNERSHIP

##### **5.1. COORDINATOR:** [insert here the acronym of your institution]

|  |  |
| --- | --- |
| Name &surname |  |
| Service/Dep. & institution |  |
| Number of years of management experience |  |

|  |
| --- |
| Professional background and experience working in ESFRI infrastructures *(max. 1/2 page in Calibri 11 font)* |
|  |

|  |  |
| --- | --- |
| Top 5 achievements, milestones or peer-reviewed publications related to the project | |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Projects carried out over the past 5 years in the fields related to the project or the ESFRI | | | | |
| Nr. | Acronym and weblink | Duration *(years)* | Funding source | Role *(Partner or Coordinator)* |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |

##### **5.2. PARTNER(S)**

*(Please copy this section as many times as there are paid partners in the project, changing the partner number and not forgetting to put the institution's acronym next to the partner)*

**PARTNER 2:** [insert here the acronym of your institution]

|  |  |
| --- | --- |
| Name &surname |  |
| Service/Dep. & institution |  |

|  |
| --- |
| Professional background and experience working in ESFRI infrastructures *(max. 1/2 page in Calibri 11 font)* |
|  |

|  |  |
| --- | --- |
| Top 5 achievements, milestones or peer-reviewed publications related to the project | |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Projects carried out over the past 5 years in the fields related to the project or the ESFRI | | | | |
| Nr. | Acronym and weblink | Duration *(years)* | Funding source | Role *(Partner or Coordinator)* |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |

##### **5.3. COMBINED EXPERTISE OF THE CONSORTIUM**

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|  |
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|  |

##### **5.4. GENDER**

*(Cross the statements that better describe your project in terms of gender and briefly comment in the space below how is this considered) (Max. 1/2 page in Calibri 11 font)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A. Is your project gender-balanced in terms of its consortium? |  | Yes |  | No |

*If you have answered 'no', comment on how you plan to make the project gender balanced.*

|  |
| --- |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| B. Does the project ensure that both men and women can provide inputs, access, and participate in project activities? |  | Yes |  | No |

*Briefly explain how the project ensures equal participation, or how you plan on ameliorating this aspect.*

|  |
| --- |
|  |

## 6. WORKPLAN

##### **6.1. GANTT CHART**

*(Please complete the Gantt chart template 🡒 See Gantt chart (Excel file) on the website).*

##### **6.2. DETAILED DESCRIPTION OF THE WORK PLAN ACCORDING TO THE GANTT CHART**

GRAPHIC EXPLAINING THE WORKFLOW *(optional)*

|  |
| --- |
|  |

WORK PLAN DESCRIPTION

*WP= Work Package; T =Task; D =Deliverable*

*(Add as many lines as needed to each work package, and as many work packages are required. Remember that WP Coordination (...), WP Data Management, WP Valorisation (...), are compulsory.*

|  |
| --- |
| WP 1: |

|  |  |  |
| --- | --- | --- |
| T.1.1. |  | |
|  |  | |
|  | |
| D.1.1.1 |  |
| D.1.1.2 |  |
| D.1.1.3 |  |
| T.1.2. |  | |
|  |  | |
|  | |
| D.1.2.1 |  |
| D.1.2.2 |  |
| D.1.2.3 |  |
| T.1.3 |  | |
|  |  | |
|  | |
| D.1.3.1 |  |
| D.1.3.2 |  |
| D.1.3.3 |  |

|  |
| --- |
| WP 2: |

|  |  |  |
| --- | --- | --- |
| T.2.1. |  | |
|  |  | |
|  | |
| D.2.1.1 |  |
| D.2.1.2 |  |
| D.2.1.3 |  |
| T.2.2. |  | |
|  |  | |
|  | |
| D.2.2.1 |  |
| D.2.2.2 |  |
| D.2.2.3 |  |
| T.2.3 |  | |
|  |  | |
|  | |
| D.2.3.1 |  |
| D.2.3.2 |  |
| D.2.3.3 |  |

|  |
| --- |
| WP 3: |

|  |  |  |
| --- | --- | --- |
| T.3.1. |  | |
|  |  | |
|  | |
| D.3.1.1 |  |
| D.3.1.2 |  |
| D.3.1.3 |  |
| T.3.2. |  | |
|  |  | |
|  | |
| D.3.2.1 |  |
| D.3.2.2 |  |
| D.3.2.3 |  |
| T.3.3 |  | |
|  |  | |
|  | |
| D.3.3.1 |  |
| D.3.3.2 |  |
| D.3.3.3 |  |

##### **6.3. RISK MANAGEMENT**

*(Please complete the table matching the risk to the task. E.g. if the risk is associated to task 2.1., please number the risk R.2.1. Add as many lines as needed to cover the risks that could delay or hinder the project ). (Max. 1/2 page in Calibri 11 font).*

|  |  |  |
| --- | --- | --- |
| Risk | Name of the Risk | Contingency Plan |
| R.X.X. |  |  |
| R.X.X. |  |  |
| R.X.X. |  |  |
| R.X.X. |  |  |

## 7. BUDGET

##### **7.1. COORDINATOR:** [insert here the acronym of your institution]

GENERAL BUDGET

*(Please fill out the different budget categories, with the help of the calculator of the Budget Rules file available on the website. Write the numbers without decimals, and use 'space' to separate thousands. E.g. One hundred fifty thousand three hundred and five euros: 150 305€. Align the numbers to the right ).*

|  |  |
| --- | --- |
|  | **EUR** |
| Staff Costs |  |
| General operation costs |  |
| Specific operation costs |  |
| Overheads |  |
| Equipment |  |
| Subcontracting |  |
| TOTAL |  |

STAFF COSTS

*(Please use one line per person under the responsibility of the coordinator - except partners and sub-contractors).*

* *If the person is paid by the project: write the number of person-months that they will be working for the project under 'person-month paid by the project', and add in the monthly cost estimation if that person was working full time. Please beware that:*

*[A] x [B] = the total staff costs under 'General budget'.*

*With A= [total person-months paid by the project]*

*and B = [monthly cost estimation if the person works full time].*

* *if the person is NOT paid by the project, write the number of person-months that they will be working within it under 'person-month not paid by the project, but do not include a monthly estimation of the cost).*

|  |  |  |  |
| --- | --- | --- | --- |
| Profile of the person (academic degree, discipline of expertise) | Person-Month paid by the project | Monthly cost estimation of the person if they were working full time | Person-Month NOT paid by the project |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| TOTAL |  |  |  |

SPECIFIC OPERATION COSTS

|  |  |
| --- | --- |
| Item / nature of the specific cost | Estimated cost (including taxes) |
|  |  |
|  |  |
|  |  |
| TOTAL |  |

EQUIPMENT

|  |  |
| --- | --- |
| Item / nature of the equipment | Estimated cost (including taxes) |
|  |  |
|  |  |
|  |  |
| TOTAL |  |

SUBCONTRACTING

|  |  |
| --- | --- |
| Item / nature of the subcontracting | Estimated cost (including taxes) |
|  |  |
|  |  |
|  |  |
| TOTAL |  |

##### **7.2. PARTNER(S)**

*(Please copy this section as many times as there are paid partners in the project, changing the partner number and not forgetting to put the institution's acronym next to the partner)*

**PARTNER 2:** [Insert here the acronym of your institution]

GENERAL BUDGET

*(Please fill out the different budget categories, with the help of the calculator of the Budget Rules file available on the website. Write the numbers without decimals, and use 'space' to separate thousands. E.g. One hundred fifty thousand three hundred and five euros: 150 305€. Align the numbers to the right ).*

|  |  |
| --- | --- |
|  | **EUR** |
| Staff Costs |  |
| General operation costs |  |
| Specific operation costs |  |
| Overheads |  |
| Equipment |  |
| Subcontracting |  |
| TOTAL |  |

STAFF COSTS

*(Please use one line per person under the responsibility of the coordinator - except partners and sub-contractors).*

* *If the person is paid by the project: write the number of person-months that they will be working for the project under 'person-month paid by the project', and add in the monthly cost estimation if that person was working full time. Please beware that:*

*[A] x [B] = the total staff costs under 'General budget'.*

*With A= [total person-months paid by the project]*

*and B = [monthly cost estimation if the person works full time].*

* *if the person is NOT paid by the project, write the number of person-months that they will be working within it under 'person-month not paid by the project, but do not include a monthly estimation of the cost).*

|  |  |  |  |
| --- | --- | --- | --- |
| Profile of the person (academic degree, discipline of expertise) | Person-Month paid by the project | Monthly cost estimation of the person if they were working full time | Person-Month NOT paid by the project |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| TOTAL |  |  |  |

SPECIFIC OPERATION COSTS

|  |  |
| --- | --- |
| Item / nature of the specific cost | Estimated cost (including taxes) |
|  |  |
|  |  |
|  |  |
| TOTAL |  |

EQUIPMENT

|  |  |
| --- | --- |
| Item / nature of the equipment | Estimated cost (including taxes) |
|  |  |
|  |  |
|  |  |
| TOTAL |  |

SUBCONTRACTING

|  |  |
| --- | --- |
| Item / nature of the subcontracting | Estimated cost (including taxes) |
|  |  |
|  |  |
|  |  |
| TOTAL |  |

## 8. DATA MANAGEMENT PLAN

*(Please complete the Data Management Plan template 🡒 See Data Management Template (Word file) on the website).*

## 9. IMPACT

##### **9.1. IMPACT OF THE PROJECT for the ESFRI**

*(This part shall not exceed 1/2 page in Calibri 11 font)*

|  |
| --- |
|  |

##### **9.2. IMPACT OF THE PROJECT FOR THE BELGIAN FEDERAL COMPONENT OF THE ESFRI**

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##### **9.3. IMPACT OF THE PROJECT for the FSI**

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##### **9.4. FOLLOW-UP COMMITTEE**

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## 10. SUSTAINABILITY

##### **10.1. INTEGRATION OF THE SERVICES/ACTIVITIES DEVELOPED BY THE PROJECT**

*(This part shall not exceed 1/2 page in Calibri 11 font)*

|  |
| --- |
|  |

##### **10.2. SUSTAINABILITY PLAN**

*(Complete the table below. Add as many lines as required).*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Category | Profile / Item | Source of  funding | If other: Specify | % funding |
|  | * *Staff* * *Operation* * *Equipment* | *Name the item, staff profile, specific service...* | * *FSI* * *Other* | * *Public*   + *Federal*   + *EU*   + *Internat. …* * *Private*   + *...* | *relative to the cost of maintenance of the service /activities* |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 5 |  |  |  |  |  |

##### **10.3. IT SUSTAINABILITY**

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|  |
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##### **10.4. SUSTAINABILITY THROUGH USE**

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|  |